## LO2 00034640

(Red	questor's Name)	<del></del>
(Add	dress)	
, (Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
		:
·		
		!

Office Use Only



900155338489

05/04/09--01059--021 \*\*25.00

PILL AN 8 24
SECRETARY OF STATE
SECRETARY OF STATE

S. HAWKES

MAY 0 6 2009

EXAMINER

## **COVER LETTER**

TO: Registration of Division of	on Section f Corporations
SUBJECT:	EU-USILLC
SUBJECT:	(Name of Limited Liability Company)
The enclosed Article	es of Amendment and fee(s) are submitted for filing.
Please return all cor	respondence concerning this matter to the following:
	Carl Hagman (Name of Person)
	3451 Bayou Sound (Firm/Company)
•	
	(Address)
	Congraced Key IFC 34778 (City/State and Zip Code)
	ion concerning this matter, please call:
CARL	HAGMAN at (941) 383-2500 (Area Code & Daytime Telephone Number)
(11)	and of terson) (The dead of Saytime Totaphole Termon)
Enclosed is a check	for the following amount:
<b>☑</b> \$25.00 Filing Fe	e \$\int_{\text{\$30.00 Filing Fee}} & \$\int_{\text{\$55.00 Filing Fee}} & \$\int_{\text{\$60.00 Filing Fee}} & \$\int_{\text{\$60.00 Filing Fee}} & \$\int_{\text{\$certificate of Status}} & \$\int_{\text{\$certified Copy}} & \$\int_{\$ce
Ro Di P.	AILING ADDRESS:  egistration Section  ivision of Corporations  O. Box 6327  allahassee, FL 32314:  Callahassee, FL 32314:  Callahassee, FL 32301  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

EU-US,	LC			
( <u>Name of the Limited Li</u> (A Fl	ability Company as it orida Limited Liability	now appears of Company)	n our records.)	
The Articles of Organization for this Limited Liab Florida document number	ility Company were	filed on	1/03	and assigned
This amendment is submitted to amend the follow	ing:			- T
A. If amending name, enter the new name of the	e limited liability co	ompany here:		
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Lia	bility Company	" the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET)	ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered offic	-	ddress on our	records, enter	the name of the new
Name of New Registered Agent:	Carl Hac	man		
New Registered Office Address:	3451 8	ayou		
	7, 2,50	•	Florida street a	•
	Cit	V)	F/, Florida _	(Zip Code)
New Degistered Agent's Signature if changing Reg	istered Agent:	′′		( <b>r</b>

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

. . . .

MGR = Manager

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM = Ma	naging Member		
<u>Title</u>	Name	Address	Type of Action
MGRU	Charlotte Doubal	agis 19t Ame East Broconten, FC 34208	Add Remove
MERAN	Helmon Hagman	345 1 Bayou Sound	Add Remove
WHRM	marante Deuxal	Bicaenten, Pl 32208 70	Add Remove
			Add Femove
		7:	Remove  Add Remove
D. If amendin	ng any other information, enter change(	(s) here: (Attach additional sheets, if necessary.)	
	.:		<del></del>
Datad	LONG BOAT KEY \$1/30-09		<del></del>
Dated	(1)	Hoya	
_	Čarl Hac	or authorized representative of a member  YYYY r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00