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(Re	questor's Name)	
(Ad	dress)	
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(City	y/State/Zip/Phone	e #)
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TALLAHASSEE, FLORIDA

of all



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 28, 2004

JEFFREY LAUK 846 SW GRAND RESERVES BLVD. ST. LUCIE WEST, FL 34986

SUBJECT: L LLC

Ref. Number: L04000091154

We have received your document for L LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 304A00071753

2005 JAN -5 PM 3: 11

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	
(Name of Limited	i Partnership)
DOCUMENT NUMBER: L 040000 911.	CU
DOCUMENT NUMBER: L 0 7 00 00 1711.	37
The enclosed Certificate of Amendment and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to the f	following:
	Pany) Pany) Rang Reserves Blue West FL 34986 Pany A Lauk Pany) Pany) Pany)
	pany) An T
	SSS L
846 SW G	KAND Reserves Blod TO TO
(Addres	SS COLUMN
SAINT LUCIE W	Vest FL 34986 Zip Code) RAND Reserves Blod FLORIDA Zip Code)
,	
For further information concerning this matter, please call:	
Csilla Lauk (Name of Person)	at (772) 878-4699
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status	Certified Copy (additional copy is enclosed) \$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
	Division of Corporations
	P.O. Box 6327 Fallahassee, Florida 32314
i ananasses, l'ivilua Jeden	rapanasto, rivina J2J14

	IRANSIV	HITAL LETTER	
TO: Registration S Division of C		•	
•	1 1 1	C	
SUBJECT:	<u> </u>	<u>C</u>	
	(Name of Lin	nited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	JEFF,	Rey A. LAUK	
	(h	lame of Person)	2005 TALLA
		iirn/Company)	TALLAHASSEE, FLORIDA Block B
		IIII Company)	5 P
	846 5	W GRAND Reso	prues blud For w
		(Address)	Dri I
	SAINT LUCIE L	Vest, FL 34 State and Zip Code)	986
	(City/	State and Zip Code)	
For further information	concerning this matter, please c	all:	
Jo	: Frey A LAU	K at (772 , 878 (Area Code & Daytime	3 - 4699
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy	Solution Status & Certificate of Status &
N account	, DD	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
N account lease Refu dual's Left.	Thomaks)		
WATS LATE			
	EET ADDRESS: stration Section	MAILING ADDRESS: Registration Section	
Divis	ion of Corporations	Division of Corpora	
	3. Gaines Street hassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida	32314
MAILED A	check for 52.90	yesterday with the	way form.
Calko Any Y	or sing you cutoubl	yesterday with the deposit the check a	ud I Coull Apply
A (. (-)		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company)

	- 12/12/24	
FIRST:	The Articles of Organization were filed on 12/17/04 and assigned document number L0400009 1154	
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:	
ARI	TICLE IV	
	Delete MGR - JEFFREY A LANK	
	Change MGRM to Jeffrey A LAUK 846 SW GRAND Reserves Blod	
ARTICO	E III SAIN LUCIC WEST FL 34986 Change Registered Agent to: JEFFREY A. LAUK	
	Change Registered Agent to: JEFFREY A. LAUK 846 SW GRAND RESERVES BLUD.	
	SAINT LUCIE WEST FL 34986	
	12/17/04 Signature of a member or authorized representative of a member CSILA LAUK Typed or printed name of signee	
Dated	12/17/04	
	and the state of t	K
	Cella Land	رسل
	Signature of a member or authorized representative of a member	
	CSKLA LAUK ROBO	
	Typed or printed name of signee	

Filing Fee: \$25.00