L07000079848

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COVER LETTER

TQ:

Registration'Section Division of Corporations

SUBJECT:

On a Dime Web Design LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lucinda Trigo

Name of Person

On a Dime Web Design LLC

Firm/Company

1081 SW 104th Ct.

Address

Miami, FL 33174

City/State and Zip Code

info@onadimewebdesign.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lucinda Trigo

Name of Person

__305**、301-292**9

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

■\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

On a Dime Web Design LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 08/03/2007		and assigned	
Florida document number L07000079848			
This amendment is submitted to amend the following: A. If amending name, enter the new name of the line.	mited liability company here:	FILE 2013 NOV -6 PH SECRETARY OF TALLAHASSEE.	
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Company," the design	nation "ELC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida str	eet address	
	, Flor		
	City .	Zip Code	

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 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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Lucinda Trigo	1081 SW 104th Ct.	Add
		Miami, FL 33174	Remove
MGRM	Roberto J. Gonzalez-Trigo	1081 SW 104th Ct.	Add
		Miami, FL 33174	Remove
		TAI	Add
		SECRE TARY OF TALLAHASSEE. F	- R
		100 A	Add Remove
			Add Remove
			Add
			Remove

D. lf am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated	
	Robert J. Santos
	Signature of a member or authorized opresentative of a member
	Roberto J. Gonzalez Typed or printed name of signee
	Page 3 of 3
	rage 5 of 5

Filing Fee: \$25.00

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