L09000110470

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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

JAN 1 5 2010

EXAMINER

COVER LETTER TO: **Registration Section Division of Corporations** 991BJ, LLC **SUBJECT:** 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: **TAMI JAMES** Name of Person HOFFMEIER ACCOUNTING & TAX SERVICE, INC. Firm/Company 1925 S. PERIMETER ROAD, STE 125 Address

For further information concerning this matter, please call:

TAMI JAMES

FORT LAUDERDALE, FL 33309 City/State and Zip Code

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

938-938-1515

Name of Person

at (954) 938-938-1515

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

	991BJ LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears of Limited Liability Company)	<u>1 our records.</u>)
The Articles of Organization for this Limited Liability C Florida document number L09000110470	Company were filed on <u>NOV</u>	EMBER 16,2009 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and end with the wo	ords "Limited Liability Company,"	'the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD	RESS)	ISIO J
		AN OFF
		F 000
Enter new mailing address, if applicable:		7 200
(Mailing address MAY BE A POST OFFICE BOX)		12.1 A
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
		, Florida
	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 Changing Registered Agent, Signature of New Registered Agent

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 **Type of Action** Title <u>Name</u> **Address** MGRM DENIS MURPHY 12440 S.W. 1ST COURT PLANTATION, FL 33325 .□ Add Remove MURPH INTERNATIONAL 12440 S.W. 1ST COURT PLANTATION, FL 33325 MGRM ✓ Add Remove ALR SERVICES, LLC ☐ Add ☐ Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JANUARY 4 , 2010

Signature of a member or authorized representative of a member

DENIS MURPHY

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00