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SECTION SEC

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EXAMINER

## **COVER LETTER**

TO:	Registration Sec Division of Corp		
SUBJE	:СТ:	Mangell E	Interprises, LLC
		Name of Limit	ed Liability Company
		Amendment and fee(s) are sub	·
Please 1	eturn all correspor	ndence concerning this matter	to the following:
	Salvatore Mangiapane		alvatore Mangiapane
			Name of Person
		Ma	ngell Enterprises, LLC
			Firm/Company
			2585 Brantley Blvd.
			Address
		Na	ples, FL 34117-4042
			City/State and Zip Code
		salatore	mangiapane@hotmail.com
For furt	her information co	oncerning this matter, please c	
	Salvato	re Mangiapane	at (239) 465-6365
	Name of		Area Code & Daytime Telephone Number
Enclose	xd is a check for the	e following amount:	<b>T</b>
	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILI	NG ADDRESS:	* STREET/COURIER ADDRESS:

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<b>_</b>	/langell Enter	prises, LLC				
(Name of the Limiter	I Liability Compar A Florida Limited L	ny as it now apper iability Company	ars on our records.)			
The Articles of Organization for this Limited L	iability Company	were filed on _	March 09, 201	10	and assi	igned
Florida document numberL10000026	533°D					
This amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company h	ere:			
The new name must be distinguishable and end wi"L.L.C."		ted Liability Com	pany," the designation	n "LLC	" or the a	bbreviation
Enter new principal offices address, if applications	cable:	<del> </del>		<del></del>		
(Principal office address MUST BE A STREE	ET ADDRESS)	2585 Brantl	ey Blvd.			
		Naples, FL	34117-4042	<b>≱</b> 00	2	
					35 35	manager.
Enter new mailing address, if applicable:				4.的	MOY	are require
(Mailing address MAY BE A POST OFFICE BOX)		2585 Brantl	ev Blvd.	¥;	£-	· ·
			34117-4042	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	.Ten	- <u>ĝ</u>
			· · · · · · · · · · · · · · · · · · ·	142 4 203 De-		No married
B. If amending the registered agent and	or registered of	fice address on	our records, ente			f the new
registered agent and/or the new registered o	ffice address her	<u>.</u> .		<b></b>		
Name of New Registered Agent:	Salvatore M	angiapane			· .	
New Registered Office Address:	2585 Brantle	ey Blvd.				
	Enter Florida street address					
		Naples	, Florida	34	4117-4	042
		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 nevely confirm that the limited liability company has been notified in writing of this change.

If Changing Registored Agent, Signature of New Registered Agent

Page 1 of 2

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 = M	Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Carl Magilewski	3906 Enterprise Ave. Naples, FL 34104	Add Remove
MGR_	Edward J. Angell	3906 Enterprise Ave. Naples, FL 34104	
MGRM	Salvatore Mangiapane	2585 Brantley Blvd. Naples, Fl., 34117-4042	✓ Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if nec	Add Remove Add Add Remove
  Dated		ber or authorized representative of a member	
	Typ	Edward J. Angell	

Page 2 of 2

Filing Fee: \$25.00