

L11000031052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

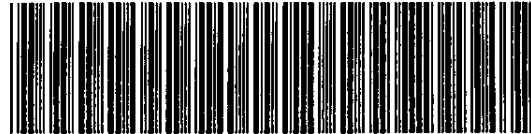
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUN 15 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SIRIUS FOLK NETWORK L.L.C.
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:

McArthur Brown II
Name of Person

MOENOPALI CHARTERED CORP.
Firm/Company

P.O. Box 770068
Address

Coral Springs, Florida 33077
City/State and Zip Code

moenopalisociety@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

McArthur Brown II at (**424**) **243-5441**
Name of Person Area Code & Daytime Telephone Number

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SHREVEPORT, LOUISIANA
TALLAHASSEE, FLORIDA

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**

SIRIUS FOLK NETWORK L.L.C.

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

The Articles of Organization for this Limited Liability Company were filed on 3/14/2011 and assigned Florida document number L11000031052.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
11 JUN 14 AM 11:08

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	McArthur Brown II	685 NW 79 Avenue Marqate, Florida 33063	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Nancy J Brown	685 NW 79 Avenue Marqate, Florida 33063	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Kofi I Cathcart	685 NW 79 Avenue Marqate, Florida 33063	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Michael Jeannot	685 NW 79 Avenue Marqate, Florida 33063	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Moenopali Chartered Corp.	685 NW 79 Avenue Marqate, Florida 33063	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE FLORIDA
11 JUN 14 AM 11:08
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Dated _____,



Signature of a member or authorized representative of a member

McArthur Brown II

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2011

MCARTHUR BROWN II
MOENOPALI SOCIETY, INC.
POST OFFICE BOX 770068
CORAL SPRINGS, FL 33077

SUBJECT: SIRIUS FOLK NETWORK LLC
Ref. Number: L11000031052

We have received your document for SIRIUS FOLK NETWORK LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

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) 245-6028.

Barbara Bostick
Regulatory Specialist II

Letter Number: 511A00012327

Note to Barbara Bostick
Amendment
the ~~file~~ ~~document~~ Previous sent
Please disregard for the record
we talked you asked me leave note
thank you



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2011

MCARTHUR BROWN II
MOENOPALI CHARTERED CORP.
POST OFFICE BOX 770068
CORAL SPRINGS, FL 33077

SUBJECT: SIRIUS FOLK NETWORK LLC
Ref. Number: L11000031052

We have received your document for SIRIUS FOLK NETWORK LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6028.

Barbara Bostick
Regulatory Specialist II

Letter Number: 611A00013759