

L12000050161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

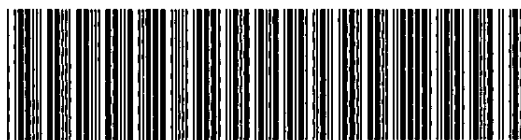
(Business Entity Name)

(Document Number)

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2012 JUL -9 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

JUL 10 2012

EXAMINER

BRIAN C. PERLIN, P.A.

Making a difference one family at a time

Brian C. Perlin, Esquire

Florida Bar Certified Specialist, Wills, Trusts & Estates
Florida Certified Public Accountant
CERTIFIED FINANCIAL PLANNER™

201 Alhambra Circle, Suite 503, Coral Gables, FL 33134
Phone: 305-443-3104 | Fax: 305-443-0106
brian@perlinestateplanning.com

July 2, 2012

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

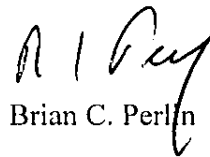
Re: 9607 Acquisition LLC

Dear Sir or Madam:

Enclosed please find *Articles of Amendment*, which we are filing on behalf of the above-referenced entity.

If you should have any questions regarding the enclosed, please do not hesitate to call me.

Very truly yours,


Brian C. Perlin

2012 JUL -9 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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BCP/lp

Enclosures

cc: Michael Walther

{00063327.DOC;1}

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 9607 ACQUISITION, 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:

MICHAEL WALTHER
Name of Person

Firm/Company

9625 N.W. 33rd STREET, UNIT 5
Address

DORAL, FLORIDA 33172
City/State and Zip Code

info@supertap-usa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Walther at (**305**) **468-0038**
Name of Person 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 JUN -9 PM 1:00

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

9607 ACQUISITION, LLC

(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 April 12, 2012 and assigned Florida document number L12000050161.

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: 9625 N.W. 33rd Street, Unit 5
(Principal office address MUST BE A STREET ADDRESS) Doral, FL 33172

Enter new mailing address, if applicable: 9625 N.W. 33rd Street, Unit 5
(Mailing address MAY BE A POST OFFICE BOX) Doral, FL 33172

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: Michael Walther
New Registered Office Address: 9625 N.W. 33rd Street, Unit 5
Enter Florida street address
Doral, Florida 33172
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:

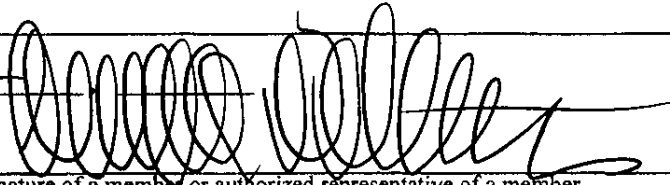
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input 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.)*

Dated

6 20 2012



Signature of a member or authorized representative of a member

MICHAEL WALT HORN

Typed or printed name of signee

2012 JUN -9 PM 1:08
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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