

/Pa	questor's Name)	
(ive	equestor s Hame;	
· (Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		V
		M.
	Office Lice Only	



07/30/07--01013--021 **25.00

COVER LETTER

Division of C	orporations		·
SUBJECT: FLY	ME TO THE MO	ON FRANK, LLC	
	(Name of Li	mited Liability Company)	
		P. Line	
		* 14	
The enclosed Articles of	of Amendment and fee(s) are su	abmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
	Desiree V. Abra	ahams	7.09
		(Name of Person)	
			是置 '2
	Kramer & Rass		
		(Firm/Company)	HQ =
	7700 N. Konda	II Drivo Suito 510	OT JUL 30 PH 12: 4 SECRETARY OF STATEMENT OF
	1100 N. Kenda	Il Drive, Suite 510	
		(1.44.055)	
	Miami, FL 331	56	
		(City/State and Zip Code)	
		244	•
For further information	concerning this matter, please	call:	
5			20
Desiree V. A		at (305) 270.887	
(Nam	e of Person)	·	ne Telephone Number)
		∵	
Enclosed is a check for th	e following amount:	•3 22 1	
✓ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
\$ MAT	LINC ADDRESS.	· CTREET/COURT	FR ADDRESS.

MAILING ADDRESS:

TO:

Registration Section

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

	FLY ME TO THE MOON FRANK, LLC			
•	(Present Name) (A Florida Limited Liability Company)			
FIRST:	The Articles of Organization were filed on December 8, 2003 and assigned document number <u>L03000050944</u>			
SECOND:	This amendment is submitted to smend the following:			
	LOIS MATT is hereby removed as Member.			
	·			
•				
•				
	7 0			
Dated	<u></u>			
	Seymour Lipsman			
	Signature of a member or authorized representative of a member			
	Seymour Lippman, Member			
	Typed or printed name of signee			

Filing Fee: \$25.00