109000016147

(1	Requestor's Name)
(,	Address)
(,	Address)
(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status

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APR -8 2009

EXAMINER

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SECRETARY OF STATE

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COVER LETTER

то:	Registration Se Division of Cor				
SUBJE	CT:	PIRATES	. R us		
20242			ited Liability Company)		
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		Roger Moore			
			(Name of Person)		
		Pirates R Us		-1 2	
			(Firm/Company)	70 8 T	
		400 SW 3rd Avenue		2009 APR -6 SECRETARY TALLAHASS	
			(Address)	(11) " (17)	
Fort Lauderdale, FL 333		Fort Lauderdale, FL 333	15	FF.S	
 			(City/State and Zip Code)	STATE STATE	
For furt	her information c	oncerning this matter, please c	all:	<i>>></i>	
Roger I	Moore		at (954 ₎ 609-5276		
(Name of Person)		of Person)	(Area Code & Daytime Telephone Number)		
Enclose	d is a check for th	ne following amount:			
	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		ation Section	STREET/COURIER ADDRESS: Registration Section Division of Corporations		

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

PIRATES		_	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records. iability Company))	
The Articles of Organization for this Limited Liability Company Florida document number L09000016147	were filed on <u>2/17/09</u>	and assigned	
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limi	ted Liability Company," the designati	on "LTC" or the abbreviation	
"L.L.C."		MAPR SECRET	
Enter new principal offices address, if applicable:	400 SW 3rd Avenue		
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33315	SSEE P	
Enter new mailing address, if applicable:		1:37 STATE LORIDA	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of		ter the name of the new	
registered agent and/or the new registered office address her	<u>e</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	, Florid		
	(Citv)	(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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action Title** <u>Name</u> **Address** Maria Maria MGRM Roger Moore 3554 Orchid Drive Remove Coral Springs, FL 33065 MGR Roberto Guerios 2666 Oakmont Weston, FL 33332 MGR Jeff Garcia 3554 Orchid Drive Coral Springs, FL 33065 ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April 1 2009 Signature of a member or authorized representative of a member Roger Moore

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00