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经重换证据 自由的人员

M. THOMAS

DEC - 4 2009

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Cocoark n	narketing Servited Liability Company	rices, LLC.
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspo	ndence concerning this matte	r to the following:	
	andreu	Name of Person	
	12555	Firm/Company Biscayne Blud	914 ### ~
	North	Address Miami, FL 33 City/State and Zip Code	FILED SECRETARY OF STATE ALLAHASSEE, FLORIDA 18 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	mrsmiche E-mail address: (llegaudet Egmail. to be used for future annual report notifica	com Fig 3
For further information co	oncerning this matter, please	_	ASSEE, FLORIDA
<u>andrew</u> Name of	gaudet Jerson	at (305) 753 · 132 Area Code & Daytime T	·
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	Cortificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fcc, 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**

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 "LLC." 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) 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: Andrew Gaydet New Registered Office Address: Andrew Gaydet Enter Florida street address North Miami, Florida 331811 Zip Code	(Name of the Limited Lia	Narketin bility Company as it rida Limited Liability	g Service mow appears on or Company)	records.)	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX) 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: Andrew Gaydet	The Articles of Organization for this Limited Liabil Florida document number	ity Company were fi 092.50	led on	18	and assigne	d
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling address MAY BE A POST OFFICE BOX) 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: Andrew Gaydet	This amendment is submitted to amend the following	ng:				
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) 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: Andrew Gaydet New Registered Office Address: Andrew Gaydet Enter Florida street address North Miami, Florida 3 31811 Zip Code	A. If amending name, enter the new name of the	limited liability cor	mpany here:			
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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: Andrew Gaydet				LLAHASS	DEC -3	<u> </u>
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: 1255 Biscayne Blud #814 Enter Florida street address	(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		mc mc		$\stackrel{\square}{\subset}$
North Miami, Florida 331811 City Zip Code			dress on our re	cords, enter the	* *	e new
North Miami, Florida 331811 City Zip Code	Name of New Registered Agent:	Andre	ب کم	udet		
·	New Registered Office Address:	12555	BISC Enter Flo	ayne Bl	4 6v	814
·		Marth				
New Registered Agent's Signature, if changing Registered Agent:	_	City			ip Code	
	New Registered Agent's Signature, if changing Regis	stered 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 thesimited 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 = I	Managing Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>M6RM</u>	michelle Gaudet	# 814 N. Miami, FC 33181	Add Remove
MGRM	andrew Gaudet	12555 Biscaye Blud # Bly N. Miami, FL 33181	Add Remove
			Add Remove
			Add Remove
			A Bomove
++			Refleve
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	v.)
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	Devolos		
		er or authorized representative of a member GAUDET d or printed name of signee	
	Туре	d or printed name of signee	· · ·

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Filing Fee: \$25.00