

L000000008771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600183098016

07/14/10--01014--020 **52.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG 12 PM 2:42

T. HAMPTON

AUG 13 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AVA Management 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:

Gary Abriola

Name of Person

AVA Management LLC

Firm/Company

800 Semoran Drive

Address

Winter Park, FL 32792

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Abriola

Name of Person

at (561)

414-4130

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 AUG 12 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 15, 2010

GARY ABRIOLA
800 SEMORAN DR
WINTER PARK, FL 32792

SUBJECT: AVA MANAGEMENT LLC
Ref. Number: L00000008771

We have received your document for AVA MANAGEMENT LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 210A00017203

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

AVA Management LLC

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG 12 PM 2:42

The Articles of Organization for this Limited Liability Company were filed on 7-25-2000 and assigned

Florida document number L00000008771.

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)

800 Semoran Drive

Winter Park, FL 32792

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

800 Semoran Drive

Winter Park, FL 32792

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>
MGRM	Dennis J. Abriola	2402 Teton Stone Run Orlando, Florida 32828	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Ronald V. Abriola	14212 Ludgate Hill Lane Orlando, Florida 32828	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Anthony V. Abriola	1737 Dogwood Forest Way Lake Mary, Florida 32746	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Violet Abriola	1737 Dogwood Forest Way Lake Mary, Florida 32746	<input type="checkbox"/> Add <input checked="" 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 7-20, 2010.

Gary Abriola, Managing Member
Signature of a member or authorized representative of a member
GARY ABRIOLA
Typed or printed name of signer

FILED
10 AUG 12 PM 2:42
SECRETARY OF STATE
DIVISION OF CORPORATIONS