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· (Re	equestor's Name)	
(Ác	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Pav/B, Moll, OD. 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:	
Paul B. Moll	
(Name of Person)	
(Firm/Company)	
4397 trater Trace Lane  (Address)  Ft Pierce, FL 3498	07 FI
(Address)	ARE TA
Ft Pierce, FL 3498	9 ;
(City/State and Zip Code)	
For further information concerning this matter, please call:	3: 23 STATE LORIDA
Paul B. Moll at 772, 466-	20 70
(Name of Person) (Area Code & Daytime Telephone Nu	mber)
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate o (additional copy is enclosed) Certified Co	

## 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

(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on $\frac{12}{22}/2000$ and assigned document number $\frac{L00000016100}{20000000000000000000000000000000000$
SECOND:	This amendment is submitted to amend the following:
	Fonda M. Moll
	4299 F 4 THE
	4597 bator Trace Lane 35 3
	Ft Pience FL 34982
	The above person, Fonda M.
	4897 bator Trace Lane 35 30 Ft Pierce, FL 34982 50 30 The above person, Fonda M.  Moll, is a 49% managing member and should be listed
	member and should be listed
	+6
D	Feb 5 th 2007
Dated/	<u> </u>
	Hall Manager
	Signature of a member or authorized representative of a member
	· · · · · · · · · · · · · · · · · · ·
	Paul B. Moll, Manager
	Typed or printed name of signee

Filing Fee: \$25.00