

L010000001640

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TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Moonbeam McSwine L.L.C.
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:

Groot Raymundo Orlando

Name of Person

Moonbeam Mcswine L.L.C.

Firm/Company

6278 N. Federal Hwy Suite 630

Address

Fort Lauderdale FL 33308

City/State and Zip Code

rayorlando56@aol.com

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

For further information concerning this matter, please call:

Groot Raymundo Orlando

Name of Person

at (**954**)

552 9272

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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
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**

Moonbeam Mcswine L.L.C.

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

The Articles of Organization for this Limited Liability Company were filed on 02/01/2001 and assigned
Florida document number L01000001640.

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)

6278 N. Federal Hwy Suite 630

Fort Lauderdale , FL , 33308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6278 N. Federal Hwy Suite 630

Fort Lauderdale , FL , 33308

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:

Groot Raymundo Orlando

New Registered Office Address:

6278 N Federal Hwy Suite 630

Enter Florida street address

Fort Lauderdale

Florida

City

FILED
11 JUN - 3 PM '08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

33308

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:

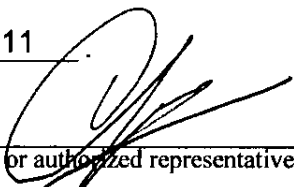
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Arzberger Thomas R	1931 SE 19th Ave. Lauderdale by the Sea FL 33062	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Arzberger Deborah B	1931 SE 19th Ave. Lauderdale by the Sea FL 33062	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Groot Raymundo O	6278 N. Federal Highway Suite 630 Fort Lauderdale FL 33308	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input 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 June 1, 2011



 Signature of a member or authorized representative of a member
 Groot Raymundo Orlando

 Typed or printed name of signee

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS					
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