

L01000001640

(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



500208604875

06/20/11--01029--011 **25.00

FILED

11 JUN 20 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUN 21 2011

EXAMINER

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:

Richard L. Richards

Name of Person

Richards & Associates

Firm/Company

232 Andalusia Ave, Suite 202

Address

Coral Gables, FL 33134

City/State and Zip Code

rrichards@richpa.net

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

For further information concerning this matter, please call:

Richard L. Richards

Name of Person

at (305)

448-2228

Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 20 AM 9:54

FILED

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)

1475 SW 18th Ave
Ft Lauderdale FL 33312

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1475 SW 18th Ave
Ft Lauderdale FL 33312

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: Richard L. Richards

New Registered Office Address: 232 Andalusia Ave, Suite 202

Enter Florida street address

Coral Gables, Florida 33134
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

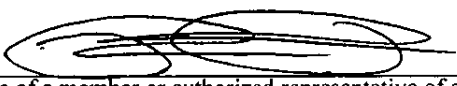
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	GROOT, RAYMUNDO O	6278 N. FEDERAL HIGHWAY STE. 630 FORT LAUDERDALE FL 33308	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Christopher S. Freeman	1475 SW 18th Ave Ft Lauderdale FL 33312	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
11 JUN 20 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated June 14, 2011.



Signature of a member or authorized representative of a member

Richard L. Richards

Typed or printed name of signee