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SECRETARY OF STATE



Dilip Patel, Esq.

Gerald P. Seipp, Esq. Admitted in Florida and New York

Brent A. Rees, Esq.Practice Limited to Immigration Law

Cypress Lakes Professional Center 140 Pine Avenue North Oldsmar, Florida 34677 Phone (813) 855-0066 Fax (813) 855-0067 www.dplawfirm.com

May 20, 2011

Department of State Registration Section P.O. Box 6327 Tallahassee, FL 32314 Via Federal Express Courier

RE:

Limited Liability Company Reinstatement

SHELTER LLC

Document # L02000004008

Dear Sir or Madam:

Enclosed please find the following:

- Completed Cover Letter and Articles of Amendment to Articles of Organization of SHELTER LLC (Document # L02000004008); and
- 2. Check #1231 in the amount of \$60.00 filing fee for the Articles of Amendment to Articles of Organization to amend the name to SHELTER (REINSTATED) LLC.

Kindly forward the Certificate of Status to the Principal Office Address.

If you have any questions or concerns, please do not hesitate to contact me at 813-855-0066.

Sincerely yours,

Dilip Patel /ph

Dilip Patel

DP/ph Enclosures

COVER LETTER

TO:	Registration Se Division of Cor			
SURJ	ECT:	Sh	nelter LLC	
		Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
•			Dilip Patel, Esq.	
			Name of Person	
			Dilip Patel Law Firm	
			Firm/Company	
		140 Pin	e Avenue North, Tampa B	ay
			Address	
			Oldsmar, FL, 34677	
			City/State and Zip Code	
		E mail address (patel@dplawfirm.com to be used for future annual report not	fication)
For fu	ther information co	oncerning this matter, please of		neuron)
		Patel, Esq.	at (_813_)	855 0066 ne Telephone Number
	Name of	Person	Area Code & Daylıı	ne Telephone Number
Enclos	ed is a check for the	e following amount:		
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$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

	Shelter	LLC				
(Name of the Limited I	,iability Compan Florida Limited Li	y as it now appear (ability Company)	s on our records.)			
The Articles of Organization for this Limited Lia Florida document number L02000040	bility Company		02/20/2002	a	nd assig	gned
This amendment is submitted to amend the follow	J					
A. If amending name, enter the new name of t	<u>he limited liabi</u>	lity company here	:			
	helter (Reinst					
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Compar	ny," the designation	"LLC" o	r the abl	breviatio
Enter new principal offices address, if applical	ble:	140 Pine Avei	nue North, Tam	<u>pa Ba</u> y	/	
(Principal office address MUST BE A STREET ADDRESS)		Oldsmar, FL,	34677			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	140 Pine Aver Oldsmar, FL,	nue North, Tamj 34677	ра Вау		
B. If amending the registered agent and/or registered agent and/or the new registered office			ır records, <u>enter</u>	the na	me of	<u>the nev</u>
Name of New Registered Agent:	Dilip Patel, E	sq., Dilip Patel	Law Firm	EGHE	<u>=</u>	-17
New Registered Office Address:	140 Pine Ave	enue North, Tar	<u> </u>	SE	ω	- Containe
		Ente	er Florida street ad	dfess		
		Oldsmar	, Florida	7/3	4677	5
New Registered Agent's Signature, if changing Re	gistered Agent:	City		SEE SEE	Code	_

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:

<u>le</u>	<u>Name</u>	Address	Type of Act
<u>.</u>			Add Remove
			□ n
			F-1 70
			n n
			<u> </u>
If amend	ling any other information, ento	er change(s) here: (Attach additional sheets, if	f necessary.)
			·
	May 17	2011	
	<u></u>	· <u></u> ·	

Page 2 of 2

Filing Fee: \$25.00