LD2000025076

(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:				





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C. LEWIS
FEB 1 7 2010
EXAMINER

COVER LETTER

TO: Registration Se Division of Cor	ction porations					
SUBJECT:	MY FUNK	Y PLANET,LLC				
Sobject.		ted Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	J(DAQUIN ABONDANO Name of Person				
		ramo di Foldon				
Firm/Company						
	600 SW DARWIN BLVD SIUTE 208					
		Address				
	POF	RT ST LUCIE, FL 34953				
		City/State and Zip Code				
	iabondano@grooyi.com E-mail address: (to be used for future annual report notification)					
For further information co	oncerning this matter, please c	all:				
SIMEAC Name of	PASCHALIDES Ferson	at (<u>772</u>) 33 Area Code & Daytime To	36-3221 elephone Number			
Enclosed is a check for th	e following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 1.2 \$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

MY FUNKY PLANET LLC

FILED

2010 FEB 16 PM 2: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appea ted Liability Company)	rs on our records.)	· · · · · · · · · · · · · · · · · · ·	
The Articles of Organization for this Limited Liability Comp	pany were filed on	09/24/2002	and assigned	
Florida document numberL0200025076	•			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :		
	O HOMES,L.L.C.			
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Comp	any," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applicable:	600 SW DAR	600 SW DARWIN BLVD SUITE 208		
(Principal office address MUST BE A STREET ADDRESS	S) PORT ST LU	CIE, FL 34953		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
(Manual address MAT BE A TOST OFFICE BOX)				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:		···		
	Enter Florida street address			
<u></u>		, 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>	Address	Type of Action
MGR_	SIMEAO PASCHALIDES	1834 SW JANNETE AVE PORT ST LUCIE,FL 34953	Add Remove
MGRM_	JOAQUIN ABONDANO	7869 SADDLEBROOK DRIVE PORT ST LUCIE FL 34986	Add Remove
MGRM_	GARCIA BETTY C	7869 SADDLEBROOK DRIVE PORT ST LUCIE FL 34986	Add ☑ Remove
MGRM_	SEBASTIAN ABONDANO	7869 SADDLEBROOK DRIVE PORT ST LUCIE FL 34986	Add ✓ Remove
MGRM	ABONDANO SEBASTIAN	7869 SADDLEBROOK DRIVE PORT ST LUCIE FL 34986	□Add ☑Remove
D. If amendii	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	Add Remove
 Dated	DAQL		TALLAHASSEE, FLURIDA
	i ypea oi	printed name of signee	

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Filing Fee: \$25.00