## 10200031521

(Requestor's Name)				
(Address)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE

D. BRUCE

DEC 17 2009

EXAMINER

## **COVER LETTER**

TO: Registration Solution of Control			٠.
ovin vnom	Argos De	evelopment, LLC	•
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	
	Glad	dis Elena Diaz de Macchi	
		Name of Person	
		Firm/Company	
	•	1940 Wilson Street	
		Address	
	150 160		
	E-mail address: (	to be used for future annual report notification)	
For further information of	concerning this matter, please of	call:	NAR I
	ena Diaz de Macchi	at ( 754 ) 423-0558	PILED  09 DEC 16 AM II: 5  SECRETARY OF STAT ALLAHASSEE. FLORE
Name c	of Person '	Area Code & Daytime Telephone Number	DEC 16 AMII: 59 AHASSEE, FLORIDA
Enclosed is a check for t	he following amount:		D
<b>₹</b> 25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2009

GLADIS ELENA DIAZ DE MACCHI 1940 WILSON STREET HOLLYWOOD, FL 33020

SUBJECT: ARGOS DEVELOPMENT, LLC

Ref. Number: L02000031521

We have received your document for ARGOS DEVELOPMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 009A00037697

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARGOS DEVEL	OPMENT, L	LC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	11/18/2002	and assigned
Florida document numberL02000031521			
Piorida document fidinoei			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Comp	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:	1940 Wilson	Street	
(Principal office address MUST BE A STREET ADDRESS)	Hollywood- FL-33020		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of		our records, <u>enter t</u>	he name of the new
registered agent and/or the new registered office address her	<u>e</u> :		09 827 844
Marin a Charles Davidson and Allerson			ASS
New Registered Office Address:			LL-<
	$\mathcal{L}_{i}$	ile. Propodi bij cer jada	
		, Florida	SA : U
	C#2		Sui- One:

New New York Court, Charleso, Walnute, Park Could Agest

I hereby accept the appointment as registered agent and agree to act in this expecity. I further agree to comply with the previous of all statistic velocities to the proper of learning temperature 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 filled to merely reflect a change in the registered affect address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Committee 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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
	<del></del>		Add Remove
<u></u>			Add
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.	
Dated	,		<u>9</u>
		To r authorized representative of a member  TO A DIAZ VE MACCHI  To r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00