

L03000023927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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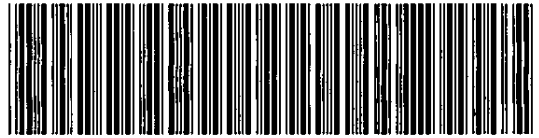
(Business Entity Name)

(Document Number)

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09 JUL 27 PM 12:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

L03 - 23927

N. O'Brien JUL 28 2009

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 2894 Warehouse, LLC
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:

Susan Argue

Name of Person

2894 Warehouse, LLC

Firm/Company

2894 47th Avenue, N.

Address

St. Petersburg, FL 33714

City/State and Zip Code

susanargue@yahoo.com

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

For further information concerning this matter, please call:

Susan Argue

Name of Person

at (727)

526-2336

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

FILED

09 JUL 27 PM 12:36

2894 Warehouse, LLC

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 07/01/03 and assigned
Florida document number L03000023927.

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:

2894 47th Avenue, N.

(Principal office address MUST BE A STREET ADDRESS)

St. Petersburg, FL 33714

Enter new mailing address, if applicable:

2894 47th Avenue, N.

(Mailing address MAY BE A POST OFFICE BOX)

St. Petersburg, FL 33714

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:

Philip A. McLeod

New Registered Office Address:

540 47th Street, N.

Enter Florida street address

St. Petersburg

, Florida

33701

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.

Philip A. McLeod
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	Robert Garcia	5130 Eisenhower Blvd, Ste 280 Tampa, FL 33634	☐ Add ☒ Remove
MGRM	Thomas Argue	2894 47th Avenue N. St. Petersburg, FL 33714	☒ Add ☐ Remove
MGRM	Susan Argue	2894 47th Avenue N. St. Petersburg, FL 33714	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated July 16th, 2009

Susan Argue
Signature of a member or authorized representative of a member

Susan Argue
Typed or printed name of signee

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TALLAHASSEE FLORIDA