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TALLAHASSEE, FLORIDA



## **COVER LETTER**

. 3	•	O I ER EET TER	
TO: Registration Se Division of Cor		3.6	
SUBJECT:	anny Can Name of Limit	ed 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:	
	Nanny Ca 210 d S Panama	Firm/Company  Hway 79 C  Address  City/State and Zip Code	B, P 32413
For further information or	E-mail address: (to oncerning this matter, please ca	be used for Juture annual report notific	ation)
Kelly		at ( <u>\$55</u> ) <u>2.58 5</u> Area Code & Daytime	Telephone Number
Enclosed is a check for th	ne 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

Nanny Ca	n LC	
( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabi		18 2003 and assigned
This amendment is submitted to amend the followi	ng:	TAL SE
A. If amending name, enter the new name of the Nany Can hard The new name must be distinguishable and end with the	1 0	OEC 20
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	e:	SA STATE
(Principal office address MUST BE A STREET A	(DDRESS)	D.M 30
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO)  B. If amending the registered agent and/or in the new registered office.	registered office address on our	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
new registered Office Address.	Enter F	lorida street address
		. 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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member <u>Title</u> Name **Address Type of Action** Remove Add Remove Remove Remove Add Remove Remove

D. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if n	ecessary.)	-	
-			-	
-			•	
Dated	18/ Desamber, 2013.			
	Signature of a member or authorized representative of a member	į.		
	Typed or printed name of signee	<u> 7</u> 6	ယ်	
	Page 3 of 3	LAHA LAHA	0EC 23	** 2222
	Filing Fee: \$25.00	ARY OF ST	PH	)
		STATE	2: ng	-

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