

L0300000 28751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

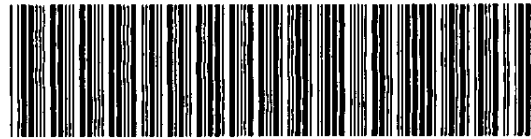
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2013 MAR 11 PM 2:17
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MAR 04 2013
D. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2013

GARY WILSON
12 S DIXIE HWY
LAKE WORTH, FL 33460

SUBJECT: HUMANICS PUBLISHING LLC
Ref. Number: L03000028751

We have received your document for HUMANICS PUBLISHING LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 713A00004501

2013 FEB 25 17:17
FEB 25 2013
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE OF FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: humanics publications 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:

gary wilson

Name of Person

humanics publications llc

Firm/Company

12 s dixie hwy-pob 1806

Address

City/State and Zip Code

lake worth florida 33460

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

For further information concerning this matter, please call:

gary wilson

Name of Person

at (404) 409 1930

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**

humanics publications

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

The Articles of Organization for this Limited Liability Company were filed on 02 01 2012 and assigned
Florida document number L03000028751

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

green dragon publishing group LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

12 s dixie hwy ste 202
lake worth fl.33460

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO1608
lake worth fl 33460

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:

Godfree Select Esq.

New Registered Office Address:

12 s dixie hwy

Enter Florida street address

Lake Worth

Florida 33460

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.

Godfree Select
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:

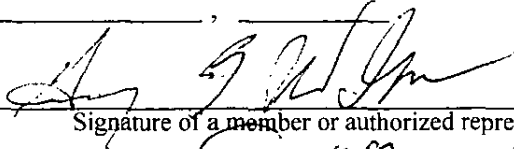
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Harry McQuitre	12 s dixie hwy	<input checked="" type="checkbox"/> Add
		lake worth Fl 33460	<input type="checkbox"/> Remove
PS	Gary Wilson	12 s dixie hwy	<input checked="" type="checkbox"/> Add
		Lake worth Flordia 33460	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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

Dated _____



Signature of a member or authorized representative of a member

Gary D. W. Johnson

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013
JAN 21
OFFICE
OF THE
CLERK
OF THE
SUPREME
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OF
FLORIDA