03000033365

(Re	equestor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL.			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				

Office Use Only



200216101992

01/09/12--01014--021 **25.00

2012 JAN -9 PM 3: 34
SECRETARY OF STATE

J. BRYAN

JAN 1 0 2012

EXAMINER

COVER LETTER

SUBJECT: BLUMBRO, LLC Name of Limited Liability Company	
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:	
Please return all correspondence concerning this matter to the following:	
David M. Blum Name of Person BLUMBRO, LLC Firm/Company 10097 Cleary Blvd. #289 Address	
BLUMBRO, LLC Firm/Company 10097 Cleary Blvd. #289 Address	
BLUMBRO, LLC Firm/Company 10097 Cleary Blvd. #289 Address	_
Firm/Company 10097 Cleary Blvd. #289 Address	7
10097 Cleary Blvd. #289 Address	1
Address	10
	بې
77	31
City/State and Zip Code	
dblum1@comcast.net	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
David Blum at (954) 370-9799	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \times \text{\$30.00 Filing Fee & Certificate of Status} \text{\$\sum_{\$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\sum_{\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\sum_{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}}	osed)

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

В	LUMBRO, LLC		
(Name of the Limited Liabil (A Florid	ity Company as it now appears a Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	9/3/2003	and assigned
Florida document numberL03000033365	·		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the li		TALL SELL	1000年100日
A. If amending name, enter the new hame of the h	inteo natinty company nere		E Som
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited Liability Compar		or the abbreviation
Enter new principal offices address, if applicable:			SE SE
(Principal office address MUST BE A STREET ADI	DRESS)		P
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>		
	·		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		ur records, <u>enter (</u>	the name of the new
Name of New Registered Agent:	·		
New Registered Office Address:			
	Enter Florida 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 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>	Type of Action
MGR	John N. Blum	9811 Scheer Court Harrisburg, North Carolina 28075	✓ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
··			Add Remove
D. If amend	ding any other information, enter	r change(s) here: (Attach additional sheets, if necessary	TILED
Dated	,	member or authorized representative of a member	
1	-	David M. Blum Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00