

# L03000041525

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(City/State/Zip/Phone #)

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2010 JUN -3 PM 2:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

June 4 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 21, 2010

TAMMY EATON  
VALENTINO FOR LIFE, LLC  
PO BOX 772125  
OCALA, FL 34477

SUBJECT: SLADE PROPERTIES, LLC  
Ref. Number: L03000041525

We have received your document for SLADE PROPERTIES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 710A00012935

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Slade Properties, 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:

Tammy Eaton  
Name of Person

Valentino for Life, LLC  
Firm/Company

PO Box 772125  
Address

Ocala, FL 34477  
City/State and Zip Code

teaton3@cf1.rr.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tammy Eaton at (352) 454-7214  
Name of Person 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

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Slade Properties, 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 10/28/2003 and assigned  
Florida document number LO3000041525.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 34477

Ocala, FL 34471

**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:

Robert York

New Registered Office Address:

4635 SE 59th St

*Enter Florida street address*

Ocala

*City*

Florida

34480

*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

Title	Name	Address	Type of Action
<u>P</u>	<u>John Anastasia</u>	<u>1015 E Ft. King St</u> <u>Ocala FL 34471</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>Tina Anastasia</u>	<u>1015 E Ft. King St.</u> <u>Ocala, FL 34471</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>mgrm</u>	<u>Valentino For Life, LLC</u>	<u>Po Box 34477</u> <u>Ocala, FL 34471</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_, \_\_\_\_\_

X 

Signature of a member or authorized representative of a member

Robert York

Typed or printed name of signee

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TALLAHASSEE, FLORIDA