

LD3000046044

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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13 DEC 18 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
DEC 19 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RICK KRAKOW 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:

RICK KRAKOW
Name of Person

RICK KRAKOW LLC
Firm/Company

17454 TALLULAH FALLS RD
Address

N. FORT MYERS, FL. 33917
City/State and Zip Code

CHRISTINME52@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICK KRAKOW at (239) 246-7694
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

APPROVED
AND
FILED

13 DEC 18 AM 11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RICK KRAKOW LLC

(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 11/29/2003 and assigned
Florida document number L03000046044

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)

17454 TALLULAH FALLS RD.
N. FT. MYERS, FL. 33917

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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>	<u>Type of Action</u>
MGR	RIK KRAKOW	17454 TALLULAH FALLS RD	<input checked="" type="checkbox"/> Add ^{NEW ADDRESS}
		N FT. MYERS, FL,	<input type="checkbox"/> Remove
		33917	
MGRM	RALPH J. AVER	20570 BRADLEY RD	<input checked="" type="checkbox"/> Add
		N FT. MYERS, FL,	<input type="checkbox"/> Remove
		33917	
MGRM	JOSHUA D. AVER	94 VINE ST.	<input checked="" type="checkbox"/> Add
		N FT. MYERS, FL,	<input type="checkbox"/> Remove
		33917	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

13 DEC 18 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated

12/15/13



Signature of a member or authorized representative of a member

RICK KRAKOW

Typed or printed name of signee

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Filing Fee: \$25.00