# L04000018854

(Re	equestor's Name)	
(Ac	Idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL MAIL
(Bu	ısiness Entity Narr	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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B. BOSTICK
NOV 2 2 2011
EXAMINER

# **COVER LETTER**

TO: Registration S Division of Co						
SUBJECT:	Nack	Holding LLC				
	Name of Lim	ited Liability Company		,		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	condence concerning this matte	r to the following:				
		Robert Cooper				
		Name of Person	-	-		
		Robert Cooper				
		Firm/Company				
		PO Box 801910				
		Address				
		Miami, FL 33280		Zo.		
		City/State and Zip Code				
	ro	bert@rcooperpa.cor to be used for future annual re	n	7> 1: 27   1: 1:		15. 2
	E-mail address: (	to be used for future annual re	port notification)	60 20 - 1 171		
For further information	concerning this matter, please of	call:		ता. ना		
	obert Cooper	at (_786 )	553089			<b>5</b> 3
Name	of Person	Area Code	& Daytime Telephon	ne Number	1 1/2	
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 Sta Certified Copy (additional copy	atus & ·	

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

(Name of the Limited	Nack Hole Liability Compa Florida Limited I	ding LLC ny as it now appear Liability Company)	rs on our records.)			
The Articles of Organization for this Limited L Florida document number			3/10/2004	8	and ass	igned
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	oility company her	<u>re</u> :			
	Arck ME					
The new name must be distinguishable and end wi 'L.L.C."	th the words "Lim	ited Liability Compa	any," the designation	ı "LLC"	or the a	lbbreviation
Enter new principal offices address, if applic	able:	20900 NE 30	Ave 8th Floor	-		
(Principal office address MUST BE A STREET ADDRESS)		Miami, FL 33	180			
		·		22 20 20 20	Ģ	
				Ś	$\overline{\Sigma}$	20-6
Enter new mailing address, if applicable:		PO Box 8019	10	174.5		- 100 mg
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 33	280	<u> </u>	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	S. March
				DRIB		
B. If amending the registered agent and/ registered agent and/or the new registered of			our records, <u>ente</u>	r the n	ame o	f the new
Name of New Registered Agent:	Robert Coo	per				<u></u>
New Registered Office Address:	20900 NE 3	30 Ave 8th Flooi	r			
	Enter Florida street address					
		Miami	, Florida		33180	)
		City		Zi	p 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

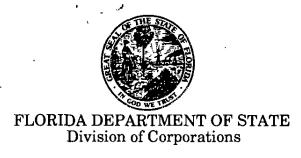
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action **Address** Title Name 1 Robert Cooper Mgrm PO Box 801910 Add Miami, FL 33280\_\_ Remove □ Add Remove ☐ Add Remove ☐ Add Remove □Add Remove Add 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 Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00



November 15, 2011

ROBERT COOPER POST OFFICE BOX 801910 MIAMI, FL 33280

SUBJECT: NACK HOLDING LLC Ref. Number: L04000018854

We have received your document for NACK HOLDING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P08000032443

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) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 911A00025786