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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAR 29 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: New City Brokers, 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:

Mario A. Garcia, Esq.

Name of Person

Mario A. Garcia, P.A.

Firm/Company

400 N. Fern Creek Ave.

Address

Orlando, FL 32803

City/State and Zip Code

office@mariogarcialaw.com

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

For further information concerning this matter, please call:

Mario A. Garcia

Name of Person

at (407)

447-9000

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

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10 MAR 26 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

New City Brokers, 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 March 10, 2004 and assigned
Florida document number L04000021255.

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)

**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:

Jeff Bonyngue

New Registered Office Address:

4007 E. Colonial Drive

Enter Florida street address

Orlando

Florida 32803

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

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10 MAR 2004 PM 12:52
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TALLAHASSEE, FLORIDA

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	Jeff Bonyngre	4007 E. Colonial Dr Orlando, FL 32803	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Mgrm	Mayra Bonyngre	4007 E. Colonial Dr Orlando, FL 32803	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Article V shall be amended to reflect the following change in the initial

members percentage of ownership as follows:

Jeffrey Bonyngre - 40%

Mayra Bonyngre - 60%

Dated March 18, 2010

Mayra Bonyngre

Signature of a member or authorized representative of a member

Mayra Bonyngre

Typed or printed name of signee

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10 MAR 26 PM 12:52
TALLAHASSEE, FLORIDA