L040000 24975

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
A. LUNT				
APR 1 3 2009				

EXAMINER

Office Use Only



300147874743

04/01/09--01037--022 **25.00



April 2, 2009

MIKE THOMPSON 128 WAYWOOD TRL. HAWTHORNE, FL 32640

SUBJECT: MIKE'S REPAIRS L. L. C.

Ref. Number: L04000024975

We have received your document for MIKE'S REPAIRS L. L. C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 409A00011144

COVER LETTER

TO: Registration Se Division of Cor	ction porations		
SUBJECT: Mik	jes Repair	S L, L, C	·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	ZOO9
	Mike T	hompson (Name of Person)	ZIOS APR 10 TRECRETARSE
·	Mike's R	e Dairs L. C	TARY OF STATE
	128 may	Wood TV. (Address)	D
	Hauthorne	City/State and Zip Code)	
For further information c	oncerning this matter, please ca	ail:	•
Mike Tho	MDSo M	at (361) 745 - / (Area Code & Daytime T	603 elephone Number)
	•		
Enclosed is a check for the	ne 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

Mikes Repairs	LLC ABB				
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.)				
The Articles of Organization for this Limited Liability Comparing Florida document number LoHODOO2497	any were filed on $04-62-200$ and assigned				
This amendment is submitted to amend the following:	•1				
A. If amending name, enter the new name of the limited line of the limited line of the limited line of the limited line. The new name must be distinguishable and end with the words "Line.L.C."	imited Liability Company," the designation "LLC" or the abbreviation				
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	128 way woods Tel. Haw thorne F1.32640				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	128 way woods Trl. Haw thorne F1.32640				
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:	LE. Thompson waywoods Tol. Hawthorne Fl				
Haul	(Enter Florida street address) (City) (Enter Florida Street address) (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 of Managing Member being added or removed from our records:

MGR = Manager

70:41 -	MY	A 4.3	True of Action
<u>Title</u>	<u>Name</u>	Address	Type of Action
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 -			Remove
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			Add Remove
			
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			SECALA ARBANA
 			
			Remove SR
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessa	MII: 07
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7	(-7 00		
Dated	7 /-07	* .	
	1. This Musica	\sim	
	Signature of a thember	or authorized representative of a member	
	John Michae	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00