104000026353

(Re	questor's Name)	
(Ad	dress)	
(u.coo,	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	<u></u>
Certified Copies	Certificate	s of Status <u></u>
Special Instructions to I	Filing Officer:	

Office Use Only



300157967223

09/28/09--01038--007 **25.00



M. THOMAS

SEP 29 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporat	ions			
SUBJI	ECT:	SPARTA / Name of Lim	ited Liability Company		
The en	closed Articles of Amen	dment and fee(s) are su	bmitted for filing.		
Plcasc	return all correspondenc	e concerning this matte	er to the following:		
	~-	Theod	ore P. Vlahos Name of Person		
			Spartan, LC Firm/Company		
		1612	Hampton Cour		
		Safe	City/State and Zip Code	2 34695 SEP 28 PARSIES SEP 28 PARSIE	11
	_	E-mail address:	City/State and Zip Code Vlahos 1 @ +amf (to be used for future annual report notificat	Da bay. Pr. Fin 2	FILE
For fur	ther information concern	ning this matter, please	call:	PAN EE. P	Ö
(Parrie Z Name of Perso	ervas "	at (727) 772 - (Area Code & Daytime To	0819 elephone Number	
Enclose	ed is a check for the follo	owing amount:			
⊠ \$25	.00 Filing Fee \$\bigci_{\text{\tint{\text{\tin\text{\texi}\text{\text{\text{\text{\texi}\text{\text{\texi}\text{\text{\texi{\texi{\texi{\texi}\tint{\texit{\ti}\tinttit{\texi}\texit{\texi}\texitt{\texitilex{\tiint{\t	30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

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> Name **Address** Type of Action MGR Theodore P. Vlahos 1612 Hampton Court ☐ Add √ Remove Safety Harbor, FL 34695-5240 THE BOARDWALK MGR 31640 U.S. Highway 19 North Palm Harbor, FL 34684 COMPANY OF PINELLAS ✓ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 15 2009 Dated_ Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

THEODORE P. VLAHOS

Filing Fee: \$25.00