# L04000032576

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**EXAMINER** 



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12/27/12--01003--018 \*\*25.00



# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: ARCADIA PRINTING, 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:    JESSICA WUKES   Name of Person   Name of Pe	
JESSICA WILKES  Name of Person	
ARCADIA PRINTING LLC	
ZOI W. OAK ST. Address	
ARCAO IA, FZ 34266  City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
DENNIS JAMES at (941) 366 - 3250  Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \\ (additional copy is enclosed)\$\$ Certified Copy \\ (additional copy is enclosed)\$\$ 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

OF S	
Access to the second se	
(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 and assigned	
Florida document number LO40000325716.	
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: JESSICA WILKES	
New Registered Office Address: 201 W. OAK ST	
Enter Florida street address	
ARCADIA , Florida 3424 (	
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	

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

Page 1 of 2

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

MGR = Manager MGRM = Managing Member <u>Title</u> **Name Address Type of Action** MGRM 2053 CORNELL ST. DENNIS JAMES ☐ Add SARASOTA FL 34237 Remove JESSICA WILKES MGR ZOI W. OAK ST. ARCADIA, FL 34260 ☐ Add ☐ Remove Add Remove ∏Add ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) DECKMBER Signature of a momber or authorized representative of a member

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00