

L04000032593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL 32301

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **N45328.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:

**Damien J Neff**

Name of Person

**N45328.LLC**

Firm/Company

**5180 Mahogany Ridge Dr**

Address

**Naples, FL 34119**

City/State and Zip Code

**Damien.Neff@Gmail.com**

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

For further information concerning this matter, please call:

**Damien J Neff**

Name of Person

at (239) **287-7575**

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

FILED  
2013 NOV - 1 PM 4:59  
TALLAHASSEE, FL  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS

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

N45328.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 04/28/2004 and assigned  
Florida document number L04000032593

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2013 NOV -1 4:53  
CLERK OF CIRCUIT COURT  
IN AND FOR THE STATE  
OF FLORIDA  
NAPLES COUNTY

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)

Damien J Neff

5180 Mahogany Ridge Dr

Naples, FL 34119

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Damien J Neff

5180 Mahogany Ridge Dr

Naples, FL 34119

**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:

Damien J Neff

New Registered Office Address:

5180 Mahogany Ridge Dr

*Enter Florida street address*

Naples

*City*

Florida 34119

*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 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	Damien J Neff	5180 Mahogany Ridge Dr	<input checked="" type="checkbox"/> Add
		Naples, FL 34119	<input type="checkbox"/> Remove
MGRM	Josef V Neff	2054 Morning Sun Lane	<input type="checkbox"/> Add
		Naples, FL 34119	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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CLERK OF DISTRICT COURT  
NAPLES, FLORIDA

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

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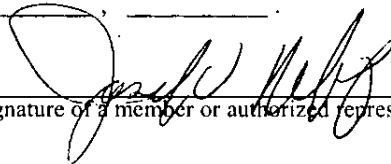
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Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

Josef V Neff

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

RECEIVED BY MAIL  
FALL HARBOR, FL 33901

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