L04000059637

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T. HAMPTON

MAY 2 4 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sibon International, WC
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:
Stewart Sogliu Named Person
•
SKS and Associates Firm/Company
5118 Hidden Cove Circle
·
Valdosta, GA 31602 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stewart Seglin at (229, 244-2633 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime 1 elephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$ Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

Sibon International,		•	
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records iability Company)	•	
The Articles of Organization for this Limited Liability Company Florida document number <u>LOY00059637</u> .	were filed on 8/10/04	and assigned	
This amendment is submitted to amend the following:	•	•	
A. If amending name, enter the new name of the limited liab	llity company here:		
	same		
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designate	ion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	Same	·	
(Principal office address MUST BE A STREET ADDRESS)		. Sin Sin	
•		3 92	
Enter new mailing address, if applicable:		21	
(Mailing address MAX BE A POST OFFICE BOX)		ik 50.60	
		Par All	
		100 GP	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ter the name of the new	
Name of New Registered Agent:	Same		
New Registered Office Address:		•	
STATE VARIABLE AND AVERAGE VARIABLE	Enter Florida street address		
	, Florid	la	
· ·	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 or Managing Member being added or removed from our records:

	Manager =- Managing Member	·	
Title	<u>Name</u>	Address	Type of Action
MGR	Saudra Fritzs	ch 113 Pelican Way Delkaey Beach, Ft 35	Add Remove
	·		Add Remove
			Add Remove
			Add Remove
-	,		Add Remove
			Add Remove
	Add Sandra Fritz with 45%. Owne May and Signature of	. \	
Dated _	Jusie	Morue	

Page 2 of 2

Filing Fee: \$25.00