1040000 (05013

(Re	equestor's Name)	
,	·	
(Ad	ldress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phon	e #1
(C.	.,,	,
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
•	_	
Special Instructions to	Filing Officer:	





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04/28/05--01059--001 **25.00



TRANSMITTAL LETTER

TO: Registration S Division of C	ection orporations		
SUBJECT:	- SecuriF	ocus, LLC	
	(Name of L	imited Liability Company)	
	of Amendment and fee(s) are so	•	
		Rita M. Floyd	
		(Name of Person)	
SecuriFocus LLC			
		(Firm/Company)	
	49	59 NW 57th Lane (Address)	
		(Tabless)	
		Springs, Florida 33067	
	(City	y/State and Zip Code)	
For further information	concerning this matter, please	call:	
	Rita M. Floyd	at (954) 775-6486	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the	e following amount:	PER SE	
Ø \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Regis Divisi 409 E	EET ADDRESS: tration Section ion of Corporations . Gaines Street nassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

*****		SocuriFocus, LLC			
		(Present Name) (A Florida Limited Limbility Con	apony)		
			Alama a		
FIRST:	The Articles of Organ document number	ization were filed on August 27, L04000065013	, 2004 and sasi	gned	
SECOND:	The following ame liability company:	ndinent(s) to the Articles of Organi	kation was/were ado	pted by the limited	
		Adding Managing Member:			
	Mr.	Poltan FEDOR	· · · · · · · · · · · · · · · · · · ·		
		Print Name	,		y spane a
		Signature of additional MGRM			
			_		
		Radnoti Mu. 17.			· ·
	3561 <u>T</u>	elsozsolca Hungar	<u>. ५ </u>		
	•	Address 🖒 🔻	ل		
Dated	April 15	2005		三	<u> پيد يا کي</u>
DRIED		*		LG F	ر در از ۱۱ مخصیت مصد
		(as show	1	IPR 28	
	Sign	salare of a member or authorized represen	talive of a member	EF STATE	
			-		
		Andras Ordez Tyroxd or printed name of sixy	wa	- GM '	۱۰,

Filling Feet \$25.00