

LD4000070955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

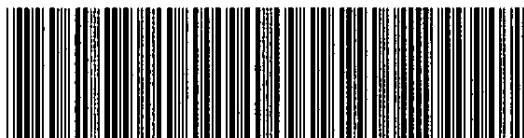
Special Instructions to Filing Officer:

L. SELLERS

JAN 27 2010

EXAMINER

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10 JAN 26 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PUNTA GORDA POOLS AND SPAS 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:

RICHARD P. CONWAY

Name of Person

Firm/Company

4378 MELIS ST.

Address

PORT CHARLOTTE, FL 33948

City/State and Zip Code

conwayrichard83@yahoo.com

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

For further information concerning this matter, please call:

RICHARD P. CONWAY

Name of Person

at (**941**)

456-0585

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2010

RICHARD P. CONWAY
4378 MELIS STREET
PORT CHARLOTTE, FL 33948

SUBJECT: PUNTA GORDA POOLS AND SPAS LLC
Ref. Number: L04000070955

We have received your document for PUNTA GORDA POOLS AND SPAS LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 710A00000964

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

PUNTA GORDA POOLS AND SPAS 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 9/24/2009 and assigned
Florida document number L04000070955.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

THE ORIGINAL FIVE STAR POOLS LLC

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**)

4378 MELIS ST.
PORT CHARLOTTE, FL 33948

Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

4378 MELIS ST.
PORT CHARLOTTE, FL 33948

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:

New Registered Office Address:

4378 MELIS ST.

Enter Florida street address

PORT CHARLOTTE, FL, Florida

City

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TALLAHASSEE
SECRETARY OF STATE
FLORIDA
33948
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

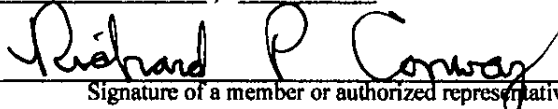
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	RICHARD P. CONWAY	4378 MELIS ST. PORT CHARLOTTE, FL 33948	☒ Add ☐ Remove
MGRM	Marcelo L. Kronenberg	4378 MELIS ST. PORT CHARLOTTE, FL 33948	☒ Add ☐ Remove
MGR	RICHARD P. CONWAY	2310 TAMiami TRAIL PUNTA GORDA, FL 33950	☐ Add ☒ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated JANUARY 19, 2010



Signature of a member or authorized representative of a member

RICHARD P. CONWAY

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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 TALLAHASSEE, FLORIDA