L040000 800 70

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name	e) ,		
(Do	cument Number)	· .		
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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10/26/09--01028--009 **60.00

09 DEC -9 PM 3:50

SECRETARY OF STATE

T. HAMPTON

DEC 1 0 2009

EXAMINER

COVER LETTER

Division	n of Corporati	ons		
SUBJECT:	Teran,	L.L.C.		
30B0EC1		Name of Limit	ed Liability Company	
The enclosed Ar	ticles of Amend	Iment and fee(s) are sub-	mitted for filing.	
Please return all	correspondence	concerning this matter	to the following:	·
		Terry C. Cobb		
			Name of Person	
			Firm/Company	
		5920 5th Stre	et, S.W.	
			Address	
		Vero Beach, F	lorida 32968	
			City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notification	on)
For further info	rmation concern	ning this matter, please c	all:	
Terry C			at (772) 778 - 55 Area Code & Daytime Te	39
	Name of Perso	n	Area Code & Daytime Te	lephone Number
Enclosed is a ch	neck for the foll	owing amount:		
\$25.00 Filin	g Fee 📑	330.00 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



RECEIVED

09 DEC -9 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 27, 2009

TERRY C COBB 5920 5TH ST SW VERO BEACH, FL 32968

SUBJECT: TERAN, L.L.C. Ref. Number: L04000080070

We have received your document for TERAN, L.L.C. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2005 annual report. The entity must be reinstated before this document can be filed.

The total amount due to reinstate is \$793.75.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 709A00034107

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Teran	, L.L.C.		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appenited Liability Company	ears on our records.)	
The Articles of Organization for this Limited Liability Con	npany were filed on	11/04/2004	_ and assigned
Florida document number L0400080070			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company b	ere:	
Terrann, L.L.C.			
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Con	pany," the designation "LL	C" or the abbrevia
			_ <u> </u>
Enter new principal offices address, if applicable:			6 555
(<u>Principal office address MUST BE A STREET ADDRE</u>	<u>(SS)</u>		<u> </u>
			3 399
Enter new mailing address, if applicable:			<u> မွာ အိတ္ခံ</u>
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			NS.
B. If amending the registered agent and/or register		our records, enter the	e name of the
registered agent and/or the new registered office addre	ss nere:		
Name of New Registered Agent:			
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	
	ı	Enter Florida street addre	ess.
		, Florida	
	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:

MGR = M: MGRM = 1	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
		·	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
<u></u>			Add Remove
D. If amer	ding any other information, enter change((s) here: (Attach additional sheets, if necessary.)	SECRETARY OF ISTATE DIVISION OF CORPORATION OF STATE OF S
Dated	10-23 , 2009 Signature of a member 6	authorized representative of a member	
	Terry C. Cobb, Managing M	_	

Page 2 of 2

Filing Fee: \$25.00