Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000514 Phone : (727)442-1300 Pax Number : (727)443-5829

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BURUNGA, L.L.C.

Certificate of Status Certified Copy Page Count 02 Estimated Charge \$25.00

HAMPTON

Electronic Filing Menu

Corporate Filing Menu

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BURUNGA	, L.L.C.		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appea bility Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company were filed on		11/12/2004	and assigned
Florida document numberL0400082454			
This amendment is submitted to amend the following:		•	
A. If amending name, enter the new name of the limited liabili	ty company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limited "L.L.C."	d Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	· ************************************		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on o	our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	-		
	En	ier Florida street addi	ress
	City	, Florida	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:

11:00

MGR = Manager

MGRM = Managing Member <u>Title</u> Address Type of Action Name MGR ROBERTO TAGLIONE 29705 WESLEY CHAPEL [Z] Add **WESLEY CHAPEL EL 33543** Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **DECEMBER 6** Dated _ Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

ALAN S. GASSMAN, Authorized Representative

Filing Fee: \$25.00