

L05000003642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

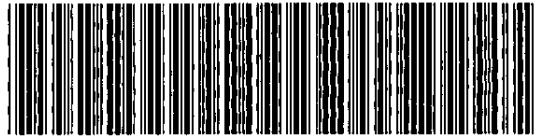
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN

MAY 21 2010

EXAMINER

The Law Offices of

*MATHEWS & PIAZZA, P.A.*

1325 S. Congress Avenue, Suite 104  
Boynton Beach, FL 33426

George W. Mathews, III  
Vincent J. Piazza

Telephone: 561-738-5501  
Facsimile: 561-738-7692

May 19, 2010

**Sent Overnight Federal Express**

Division of Corporation  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

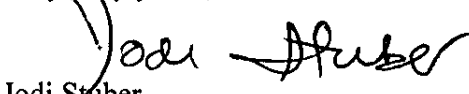
RE: Angel Acquisitions, LLC / Registered Agent Change

To whom it may concern:

Attached please find documents changing the Registered Agent for the above referenced limited liability company. In addition enclosed is our check # 1899 in the amount of \$25.00, which represents payment for this change.

If you have any questions, please feel free to contact our office.

Very truly yours,

  
Jodi Stuber  
Assistant

Enclosures

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Angel Acquisitions, 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:

Suzanne Morton  
Name of Person  
Angel Acquisitions, LLC  
Firm/Company  
240 S.E. 23rd Avenue  
Address  
Boynton Beach, FL 33435  
City/State and Zip Code  
suzannemortonccg@gmail.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Suzanne Morton at ( 561 ) 389-5102  
Name of Person 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

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

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TALLAHASSEE, FLORIDA

\_\_\_\_\_  
**(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 January 12, 2005 and assigned Florida document number L05000003642.

This amendment is submitted to amend the following:

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

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:** 240 S.E. 23rd Avenue  
**(Principal office address MUST BE A STREET ADDRESS)** Boynton Beach, FL 33435

**Enter new mailing address, if applicable:** 240 S.E. 23rd Avenue  
**(Mailing address MAY BE A POST OFFICE BOX)** Boynton Beach, FL 33435

**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:**

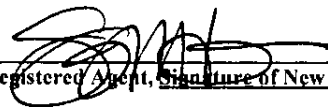
**Name of New Registered Agent:** Suzanne Morton

**New Registered Office Address:** 240 S.E. 23rd Avenue  
*Enter Florida street address*

Boynton Beach, Florida 33435  
*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:

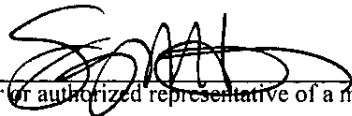
MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Concord Trust Company	201 South Phillips Ave Ste 234 Sioux Falls, SD 57104	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Suzanne Morton	240 S.E. 23rd Avenue Boynton Beach, FL 33435	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated May 10, 2010.



Signature of a member or authorized representative of a member

Suzanne Morton

Typed or printed name of signee

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