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## **COVER LETTER**

#### TO: Registration Section Division of Corporations

SUBJECT:	METROPOLITAN DESIGN & DEVELOPMENT, LL	C

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:

DEE DEVANE

Name of Person

#### METROPOLITAN DESIGN & DEVELOPMENT, LLC

Firm/Company

526 S. HYER AVE.

Address

2011 APR -4

PH

3: 82

ORLANDO, FL 32801

City/State and Zip Code

DDEVANEMDD@AOL.COM

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

For further information concerning this matter, please call:

DEE DEVANE	at(321) 6	89-3940
Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:		
∑ \$25.00 Filing Fee Certificate of Status	S55.00 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/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## METROPOLITAN DESIGN & DEVELOPMENT, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

This amendment is submitted to amend the following:

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

DEVANE DEVELO	DPMENTS, LLC ;	$\geq_{12}$	20	
The new name must be distinguishable and end with the words "Lim "L.L.C."		LC"	orth	abbreviation
Enter new principal offices address, if applicable:	ය 		1	
(Principal office address MUST BE A STREET ADDRESS)			<u>.</u>	TT.
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		- 4	30	
Enter new mailing address, if applicable:	1707 EAST MICHIGAN STREET			
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32806			

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

Name of New Registered Agent:		
New Registered Office Address:	Enter Flori	da street address
_		, 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 = Manager MGRM = Managing Member

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<u>Title</u>	Name	Address	<b>Type of Action</b>
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			Add Remove
			Add Remove
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D. If ameno	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessa	
Dated	3 31].20	Revale	
		or authorized representative of a member DEE DEVANE or printed name of signee	
		Page 2 of 2	

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Filing Fee: \$25.00