## 05000041381

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**EXAMINER** 

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## **COVER LETTER**

TO:

TO: Registration Section Division of Corporations	
SUBJECT: GUZMAN LASERNA, 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:	
DORCAS G. TROCHE	
(Name of Person)	
RCG ACCOUNTING & ASSOCIATES INC.	
(Firm/Company)	
9000 SHERIDAN STREET SUITE 138	න වෝ දැක දැක
(Address)	
PEMBROKE PINES, FL 33024 SH - C	<u> </u>
(City/State and Zip Code)	D T
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For further information concerning this matter, please call:	
DORCAS G. TROCHE at (954 ) 862-2222 EXT 3	_
(Name of Person) (Area Code & Daytime Telephone Number)	
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Enclosed is a check for the following amount:	
▼\$25.00 Filing Fee  \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	Status`& /
•	
MAILING ADDRESS: Registration Section Division of Corporations P.Ö. Box 6327 Tallahassee, FL 32314  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	

But the meet have to repropose the present

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

GUZMAN LASERNA, 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 04/27/05 and assigned Florida document number <u>L05000041381</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: **CHARMING SMILES LLC** The new name must be distinguishable and end with the words "Limited Liability Company," the designation the abbreviation "L.L.C." 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: (Enter Florida street address) (City)

## 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)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member ' Address <u>Title</u> <u>Name</u> **Type of Action** 1497 CANARY ISLAND DRIVE **MGRM HUMBERTO CELIS** WESTON, FL 33327 ☐ Remove ☐ Add ☐ Remove □Add Remove ∏Add Remove 2000 ⊟Add Remove SHE. FL Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated JUNE 16 Signature of a member or authorized representative of a member GABRIELA LASERNA Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

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Filing Fee: \$25.00