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S. HAWKES
FEB 0 9 2009
EXAMINER

COVER LETTER

TO: Registration So Division of Co			
SUBJECT: MSR	INVESTMENTS LLe (Name of Lim	C ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MICHAEL ROWE		
		(Name of Person)	
		(Firm/Company)	
	10030 NW 56 STREET	(Address)	
	CORAL SPRINGS FL 3	,	
For further information of	concerning this matter, please c	all:	
MICHAEL ROWE		at (954) 340-3183	·
(Name	of Person)	(Area Code & Daytime T	Celephone Number)
Enclosed is a check for t	he 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)
N 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	INC. A DADDECC	CERTIFICATION OF THE PROPERTY	A DDDECC.

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

MSR INVESTMENTS LLC

company has been notified in writing of this change.

(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 Lia	ability Company w	ere filed on 05/0	09/2005	and	l assigned
Florida document number L05000045841	·			SEC	2
This amendment is submitted to amend the follow	wing:			<u> </u>	
A. If amending name, enter the new name of	the limited liabili	ity company her	<u>e</u> :	[iii] an	FTY
N/A				73.22	
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Compa	ny," the designation	"ILC" or I	the abbreviation
Enter new principal offices address, if applica	ble:				
(Principal office address MUST BE A STREET	(ADDRESS)				
Enter new mailing address, if applicable:		10030 NW 56 S	STREET		
(Mailing address MAY BE A POST OFFICE BOX)		CORAL SPRINGS FL 33076			
B. If amending the registered agent and/o registered agent and/or the new registered off	ice address here:		our records, <u>ente</u>	r the nam	ne of the nev
Name of New Registered Agent:	MICHAEL ROWE				
New Registered Office Address:	10030 NW 56 STREET (Enter Florida street address)				
*					
	CORAL SPRING	GS .	, Florida _	33076	
		(City)	,,		Code)
New Registered Agent's Signature, if changing R	egistered Agent:				

Page 1 of 2

(If Changing Registered Agent, Signature of New 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

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:

	Manager = Managing Member		
Title .	<u>Name</u>	Address	Type of Action
·			Add
			Remove
	3		Add
		10	. □ gemove
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			Add :
			Remove
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D. If am	nending any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)	
	ARTICLE III (ANY LAWFUL PURPOSE)		_
			-
Dated	February 04		
Dated	, 20,		
	Signature of a merr	aber or authorized representative of a member	
	MICHAEL ROWE		
	Tv	ned or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00