

**L05000045901**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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10/3/06 - [initials]*

**B. Tack** OCT 04 2006

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: COLONIAL MANAGEMENT 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:

TRACEY BLACK  
(Name of Person)  
COLONIAL MANAGEMENT LLC  
(Firm/Company)  
341 N. SUMMERLIN AVE  
(Address)  
ORLANDO FL 32803  
(City/State and Zip Code)

For further information concerning this matter, please call:

TRACEY BLACK at 407 242 0042  
(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

COLONIAL MANAGEMENT LLC

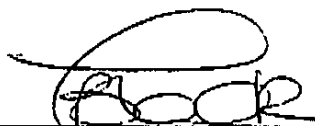
(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 05/09/2005 and assigned document number LO5000045961

SECOND: This amendment is submitted to amend the following:

1. Change Registered agent address to:-  
341 N. Summerlin Ave, Orlando, FL 32803
2. Remove Carrs-The Traditional Barber Inc as  
Manager / Member
3. Change Principle address to:-  
341 N. Summerlin Ave, Orlando, FL 32803
4. Change Mailing address to:-  
341 N. Summerlin Ave, Orlando FL 32803

Dated 10/03/2006



Signature of a member or authorized representative of a member

TRACEY BLACK

Typed or printed name of signer

Filing Fee: \$25.00

06 SEP 28 PM 1:40

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