## L05000005474

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B. BOSTICK

JUL 11 2011

**EXAMINER** 

## COVER LETTER

Division of	Corporations			
SUBJECT:	VTJ SE	RVICES, LLC		
	Name of Lim	ted Liability Company		
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing.		
Please return all corre	espondence concerning this matter	to the following:		
	MATTHE	W J. MONAGHAN, ESQUIRE	····	
		Name of Person		
	HOWZE, M	MONAGHAN & THERIAC, PLO	<u> </u>	
		Firm/Company		
	96	WILLARD ST, STE. 302		
		Address		
		COCOA, FL 32922		
	City/State and Zip Code		TACE 1	
	MURPHYIN E-mail address: (	IDUSTRIESLLC@GMAIL.CO! to be used for future annual report notification		7 ]
For further information	on concerning this matter, please of	·		A STATE OF THE STA
MA	ARY K. HARTNEY	<sub>at (</sub> 321 <sub>)</sub> 639-13	B20 EXT 3 B F F F F F F F F F F F F F F F F F F	
Nan	ne of Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 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	t)
	AILING ADDRESS: gistration Section	STREET/COURIER Registration Section	ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

**Registration Section** 

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	VTJ SERVICES, LLC		
(Name of the Limite	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	·
`			
The Articles of Organization for this Limited I	06/30/2005	and assigned	
Florida document number L0500006	55474		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name o</u>	of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	cable:	<u> </u>	
(Principal office address MUST BE A STRE	ET ADDRESS)		
		ALI	£ = .
		ÁH	
Enter new mailing address, if applicable:		ጋ። (/) (/)	1 CONTRACTOR OF THE PERSON OF
(Mailing address MAY BE A POST OFFICE BOX)			1c -0 M
177 MINING WWW. 655 172.11 B2.11 G51 G1 T1 T1 T1		-	
B. If amending the registered agent and registered agent and/or the new registered or			
Name of New Registered Agent:	WILLIAM MURPHY		·
New Registered Office Address:	315 LINCOLN AVE.		
	En	ter Florida street add	ress
	CAPE CANAVERAL	, Florida	32920
	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>	Type of Action
PRES	VICKI A. ALLEN	9020 N. ATLANTIC AVE. CAPE CANAVERAL, FL 32920	☐ Add ☑ Remove
<u>VP</u>	JEFFREY B. ALLE	9020 N. ATLANTIC AVE. CAPE CANAVERAL, FL 32920	☐ Add ☐ Remove
MGMR	WILLIAM MURPHY	315 LINCOLN AVE CAPE CANAVERAL, FL 32920	✓ Add ☐ Remove
<del></del>			Add Remove
	·		Add Remove
			Add Remove
D. If ameno	ling any other information	, enter change(s) here: (Attach additional sheets, i	f necessary.)
			11 JUL -8 PH
Dated	JUNE 1		II: 47
	Signatu	re of a member or authorized representative of a membe	er
	WI	LLIAM MURPHY, MANAGER/MEMBER	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 17, 2011

MATTHEW J. MONAGHAN, ESQ. HOWZE, MONAGHAN & THERIAC, PLC 96 WILLARD STREET, SUITE 302 COCOA, FL 32922

SUBJECT: VTJ SERVICES LLC Ref. Number: L05000065474

We have received your document for VTJ SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 911A00014769