# 0500009332

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷ #)
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(Do	cument Number)	
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12/31/07--01006--007 \*\*25.00

T. CLINE

JAN - 2 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corpo		
SUBJECT: Lat	Knic LLC (Name of Limited Liability Company)	
	(Name of Entitled Elability Company)	
The enclosed Articles of Ar	nendment and fee(s) are submitted for filing.	
Please return all correspond	ence concerning this matter to the following:	
	Elizabeta Herman-Ennen (Name of Person)	
	Latanic, LLC (Firm/Company)	
	3914 West Riverside Dr.	
	(Address)	
	Fort Myers PL 33901 (City/State and Zip Code)	
		7
For further information con	rerning this matter, please call:	
Elizabeth He	(City/State and Zip Code)  PERFORMANT AND SECOND SE	
(Name of I	erson) (Area Code & Daytime Telephone Number)	هجد:
Enclosed is a check for the	ollowing amount:	
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status  Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy	

### MAILING ADDRESS:

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

### STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

$\cdot$
(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 912205 and assigned  Florida document number L0500093322
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
<u> </u>
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or 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:
rm [ <sup>m</sup> []
Name of New Registered Agent:
New Registered Office Address:
(Enter Florida street address)
, Florida
(City) (Zip Code)
New Registered Agent's Signature if changing Registered Agents

### 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 Type of Action Address Title 1 Name WCE Investment 3914 W. Riverside Dr. Holding Fortmyers Fl 33901 Remove WLE Investment 3914 W. Riversia Br. Fort Myers, Fe 33101 Honda Lifestyle 14311 metropolis Ave Homes if Fort Fort Myers Pl Myers

Florida Lifestyle 14311 metropolis Ave; Homes of Fort Fort Myers Pl Myers Remove 0 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 12-31

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00