## L05000097521

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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

MAY 13 2011

**EXAMINER** 

## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJEC	ste	efan Latt LLC	
0000	· · · — — — — — — — — — — — — — — — — —	mited Liability Company	<del></del>
The enclo	osed Articles of Amendment and fee(s) are s	ubmitted for filing.	
Please re	turn all correspondence concerning this man	er to the following:	
		Stefan Latt	FALSE T
		Name of Person	HAY 12 PH 3: 27 ECRETARY OF STATE ECRETARS SEE, FLORE
		Firm/Company	REFERENCE OF THE PROPERTY OF T
		8874 Carlyle Ave	J. 27
		Surfside, FL 33154	·
		City/State and Zip Code	
	St E-mail address:	efan.miami@gmail.com (to be used for future annual report noti	fication)
For furthe	er information concerning this matter, please	call:	
	Stefan Latt Name of Person	at ( 305 )	951 60 47 ne Telephone Number
		, Codo de 21.,	is religione ranice.
Enclosed	is a check for the following amount:		
\$25.00	Filing Fee \$\times \text{\$\sum \$\sum \$\sum \$\text{Status}\$}\$  Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status &  Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		STREET/COUR Registration Section Division of Corpo Clifton Building	on

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Stefan Latt LLC			
( <u>Name of the Limited Liab</u> (A Flori	ility Company as it now appear da Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liabilit  Florida document numberL05000097521		10/04/2005	and assigned	
This amendment is submitted to amend the following  A. If amending name, enter the new name of the		<u>e</u> :	FILED SECRETARY OF	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compar	ny," the designation "I		
Enter new principal offices address, if applicable:	<u></u>		, , , , , , , , , , , , , , , , , , , ,	
(Principal office address MUST BE A STREET AD	DRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
	<del></del>			
B. If amending the registered agent and/or represent and/or the new registered office a	gistered office address on ou ddress here:	ur records, <u>enter t</u>	he name of the nev	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	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

W

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member

**Title** Name <u>Address</u> Type of Action Agnes Ukonmaanaho 8874 Carlyle Ave 🗹 Add MGRIN SL Surfside FL, 33154 Remove ☐ Add ☐ Remove Remove ∏Add \_\_Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 05 / 09 / 2011 Dated \_\_\_ Signature of a member or authorized representative of a member Stefan Latt Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

QV