L05000 110612

(Re	equestor's Name)	
(Ad	idress)	
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(Cil	ty/State/Zip/Phone #	<u> </u>
(O.	ty otato. E.p. Tiono	,
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)	
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SECRETARY OF STATE
TAIL AHASSEE, FLORID.



COVER LETTER

Registration Section

TO:

Division of Corporations							
SUBJECT: SUZANN	E DELAHANTY, LLC.						
	(Name of Lin	nited Liability Company)					
m		t. 10 mil					
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.					
Please return all correspo	ndence concerning this matter	to the following:					
		_					
	Rosi	e Zamora (Name of Person)					
		(Name of Person)					
	Frie	dman & Frost, P.L.					
-		(Firm/Company)					
		1 2.					
	1111	Brickell Avenue, Suite	2050				
	(Address)						
	Mia	mi, FL 33131					
	((City/State and Zip Code)					
	1. M. S. J. J. S. J. J. S. J.	A CANADA CAN					
For further information co	oncerning this matter, please of		•				
ROSIE ZA	MORA	at β05.) 374-3001					
(Name o	of Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a check for the f							
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &				
		(additional copy is enclosed)	Certified Copy				
			(additional copy is enclosed)				
MAILING ADDRESS:		STREET/COURIER ADDRESS:					
	ation Section	Registration Section					
P.O. Bo	n of Corporations	Division of Corporations Clifton Building					
	ssee, FL 32314	2661 Executive Center Circle					
		Tallahassee, FL 3230	01				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SECRETARY OF TALLAHASSEE, FLORIDA

The same of the sa

SUZANNE DELAHANTY, LLC.
(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles document n				on <u>11/</u>	15/2005	and	d assigned	
SECOND:	: This amendment is submitted to amend the following:								
	THE 1	NAME OF	THE	FLORIDA	LIMITED	LIABILITY	COMPANY	TO:	
		SUZANN	E DEI	LEHANTY,	LLC.			<u>-</u>	
Dated Oc	ctober 23	. 2007	•						
Jaicu		•		,	<u> </u>				
						B			
			<u> </u>			1-			
			Signati	ure of a men	nber or autho	orized representa	itive of a mer	nber	
				IRWIN	M. FROST				
Typed or printed name of signee									

Filing Fee: \$25.00