

LO6 0000 20385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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T. CLINE
SEP 27 2012
EXAMINER

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2012 SEP 26 AM 11:31
CLERK OF THE COURT
TALLAHASSEE, FLORIDA

LAW OFFICES
STEVEN M. ROSEN

ADMITTED TO PRACTICE IN
FLORIDA AND NEW YORK

5601 BUILDING
5601 BISCAYNE BOULEVARD
MIAMI, FLORIDA 33137
TELEPHONE: (305) 758-3100
FAX: (305) 756-7105
E-MAIL: SMRLWS@CS.COM

September 24, 2012

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

Re: Badrutt's Place LLC
Florida Document No.: L06000020385

Dear Sir or Madam:

In furtherance of my representation of Badrutt's Place LLC, you will kindly find enclosed herewith the following:

1. Cover Letter concerning the Articles of Amendment to be filed in this case.
2. Steven M. Rosen, P.A. check payable to the Florida Department of State in the sum of \$60.00 as is required for the filing of that which follows, this together with a certificate of status and certified copy.
3. Original and one copy of Articles of Amendment to Articles of Organization of Badrutt's Place LLC, therein seeking the effectuation of a name change of this entity to Saunierre Sport LLC.

In the event that you require further or additional documentation or information, do not hesitate to contact the undersigned.

Very truly yours,

Steven M. Rosen

SMR/mmb
encls.
cc: Mr. Johannes Badrutt

2012 SEP 26 AM 11:31
FILED
STATE OF FLORIDA
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Badrutt's Place 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:

Steven M. Rosen

Name of Person

Steven M. Rosen P.A.

Firm/Company

5601 Biscayne Boulevard

Address

Miami, Florida 33137

City/State and Zip Code

Smrllws@cs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven M. Rosen

Name of Person

at (305)

758-3100

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Badrutt's Place LLC

(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 2/23/2006 and assigned
Florida document number L06000020385.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Saunierre Sport LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

2012 SEP 26 AM 11:00
STATEMENT OF SERVICE
TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

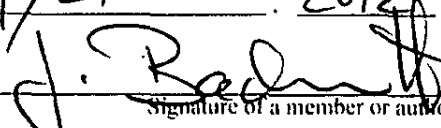
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

9/21 2012


Signature of a member or authorized representative of a member

Johannes Badrutt

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

SECRETARY OF STATE
TAMARA S. JENKINS
2012 SEP 26 AM 11:31

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