

L06000020655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

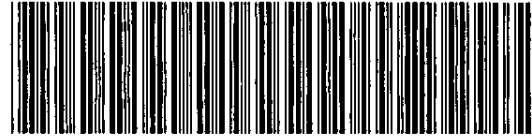
(Business Entity Name)

(Document Number)

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13 AUG 23 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
AUG 26 2013

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Elite Enterprise 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:

Bosko Lazic

Name of Person

Elite Enterprise LLC

Firm/Company

55 W Church St Ste 211

Address

Orlando Florida 32801

City/State and Zip Code

bosko@loft55orlando.com

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

For further information concerning this matter, please call:

Bosko Lazic

Name of Person

at (**407**) **792-2555**

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

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

FILED
13 AUG 23 PM 3: 56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Elite Enterprise 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 02/24/2006 and assigned
Florida document number L06000020655

This amendment is submitted to amend the following:

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

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:

55 W. Church Street Suite 211

(Principal office address MUST BE A STREET ADDRESS)

Orlando FL 32801

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:

Bosko Lazic

New Registered Office Address:

55 W. Church Street Suite 211

Enter Florida street address

Orlando

City

Florida 32801

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 606, 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:

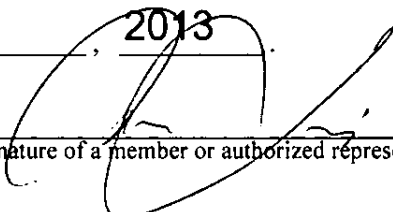
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGM	Vito Badalamenti	414 Riverson Ct	<input type="checkbox"/> Add
		Orlando, FL 32828	<input checked="" type="checkbox"/> Remove
MGM	Bosko Lazic	55 W. Church St	<input checked="" type="checkbox"/> Add
		Ste 211	<input type="checkbox"/> Remove
		Orlando FL 32801	
			<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 August 22,

2013


Signature of a member or authorized representative of a member

Bosko Lazic

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00