

L 06000023097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

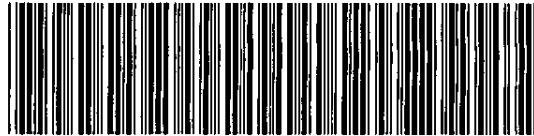
Special Instructions to Filing Officer:

**A. LUNT**

NOV 24 2008

**EXAMINED**

Office Use Only



800138096548

11/21/08--01015--001 \*\*25.00

**FILED**

2008 NOV 21 AM 11:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: 707 Sombrero 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:

Mark Fleer  
(Name of Person)

707 Sombrero LLC  
(Firm/Company)

12565 o/s Hwy  
(Address)

Marathon , Florida 33050  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Fleer at ( 305 ) 942-1580  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**FILED**  
2008 NOV 21 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

707 Sombrero 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 03/02/2006 and assigned  
Florida document number L06000023097.

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:

(Principal office address MUST BE A STREET ADDRESS)

707 Sombrero LLC

12565 o/s Hwy

Marathon , Fl. 33050

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

707 Sombrero LLC

12565 o/s Hwy

Marathon , Fl. 33050

**FILED**  
2008 NOV 21 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: John J Wolfe

New Registered Office Address: 2955 o/s Hwy

*(Enter Florida street address)*

Marathon , Florida 33050

*(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)

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>
MGR	Stephen Cusimano	1423 Patricia St Key West FL 33040	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Mark Fleer	12565 o/s Hwy Marathon FL 33050	<input checked="" 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

2008 NOV 21 AM 11:23  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

FILED

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

Dated 11/17/08

*Mark Fleer*

Signature of a member or authorized representative of a member

Mark Fleer

Typed or printed name of signee