

L06000033201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

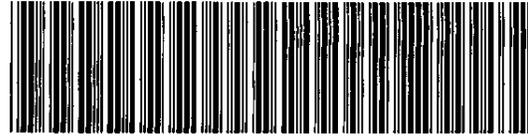
(Business Entity Name)

(Document Number)

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

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11/02/11--01006--002 \*\*7.50

10/11/11--01016--010 \*\*52.50

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11 OCT 31 AM 9:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK  
NOV 2 - 2011  
EXAMINER

**THE KEANE LAW FIRM, CHARTERED**

GREGORY G. KEANE  
ATTORNEY AT LAW  
BOARD CERTIFIED TAX ATTORNEY  
BOARD CERTIFIED WILLS, TRUSTS  
AND ESTATES ATTORNEY  
CERTIFIED PUBLIC ACCOUNTANT

ATTORNEYS AND COUNSELORS AT LAW  
1000 S.E. MONTEREY COMMONS BLVD., SUITE 202  
STUART, FLORIDA 34996  
TEL. (772) 288-0000 - FAX (772) 221-9028  
EMAIL: ggk@keaneattorneys.com

GLENN M. MEDNICK  
ATTORNEY AT LAW  
OF COUNSEL

DOYLE E. RICHARDSON  
ATTORNEY AT LAW  
OF COUNSEL

DIANE L. STRICKLAND  
ATTORNEY AT LAW  
MASTER OF LAWS, TAXATION

October 3, 2011

Registration Section  
Division of Corporations  
PO BOX 6327  
Tallahassee, Florida 32314

**Re Articles of Amendment**

To Whom It May Concern:

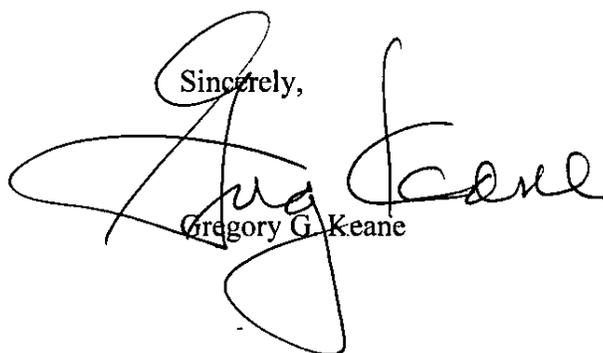
Please find attached hereto the Articles of Amendment in connection with Lomilecollector, LLC along with our check in the amount of \$52.50 which represents payment for same.

Please forward the Certified Certificate of Status to our office in the pre-paid postage envelope attached.

If you have any questions regarding the above, please do not hesitate to contact our office.

Best regards.

Sincerely,



Gregory G. Keane

GGK/ly  
Enclosures (Stated)

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11 OCT 31 AM 9:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LOMILECOLLECTOR, 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:

**GREGORY G. KEANE**  
Name of Person  
**THE KEANE LAW FIRM, CHARTERED**  
Firm/Company  
**1000 SE MONTEREY COMMONS BLVD. STE 202**  
Address  
**STUART, FLORIDA**  
City/State and Zip Code  
**ggk@gate.net**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**GREGORY G. KEANE, ESQUIRE** at ( **772** ) **288-0000**  
Name of Person Area Code & Daytime Telephone Number

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**

**LOMILECOLLECTOR, 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 MARCH 30, 2006 and assigned Florida document number LO6000033201.

This amendment is submitted to amend the following:

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

N/A

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:**

THE KEANE LAW FIRM, CHARTERED

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

1000 SE MONTEREY COMMONS BLVD

**(Mailing address MAY BE A POST OFFICE BOX)**

SUITE 202

STUART, FLORIDA 34996

**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:**

GREGORY G. KEANE

**New Registered Office Address:**

1000 SE MONTEREY COMMONS BLVD, STE 202

*Enter Florida street address*

STUART

, Florida

*City*

34996

*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.*

*G. G. Keane*  
**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

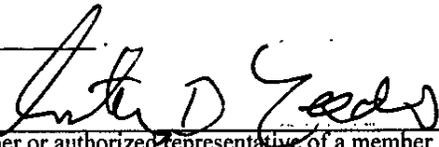
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LEEDS, J.G.	2355 NE OCEAN BLVD #32A STUART, FLORIDA 34996 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ANTHONY LEEDS	525 PARK AVENUE NEW YORK, NEW YORK 10021	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	MERRIE GRIFFIN	#7 LOWNDES PLACE LONDON, SW1X8DB	<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

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 11 OCT 31 AM 9:38  
 STATE OF FLORIDA  
 TALLAHASSEE

Dated 9/26/11



Signature of a member or authorized representative of a member

ANTHONY LEEDS

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 13, 2011

GREGORY G. KEANE  
THE KEANE LAW FIRM, CHARTERED  
1000 S.E. MONTEREY COMMONS BLVD., #202  
STUART, FL 34996

SUBJECT: LOMILECOLLECTOR LLC  
Ref. Number: L06000033201

We have received your document for LOMILECOLLECTOR LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$7.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 011A00023522