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(Requestor's Name)				
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, ,				
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SECRETARY OF STATE
SECRETARY OF STATE

M. THOMAS
MATHER
EXAMINE
EXAMINE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	BUBBLE	FUN LLC
	Name of Limi	ted Liability Company
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.
Please return all corresp	ondence concerning this matter	to the following:
	EM	IL PANTOJA
		Name of Person
	RELIABLE	E LAWN SERVICE LLC
		Firm/Company
	13424 SW	89 TERRACE
		Address
	MIAMI,	FLORIDA 33186-1571 City/State and Zip Code RON 013 @ AOL. COM To be used for future annual report notification)
		City/State and Zip Code
	Tibul	eoNO13@AOL.COM 品目T
		eo N 013 W AOL. COM to be used for future annual report notification) all: 786 586 - 6306
For further information	concerning this matter, please of	all:
EMIL	PANTOJA	City/State and Zip Code RON 0/3 @ AOL. COM to be used for future annual report notification) Parall: 786 586 - 6306 Area Code & Daytime Telephone Number Area Code & Daytime Telephone Number
Name o	of Person	Area Code & Daytime Telephone Number
Enclosed is a check for t		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAIL	JNG ADDRESS:	STREET/COURIER ADDRESS:
Regist	ration Section	Registration Section
P.O. B	on of Corporations Sox 6327	Division of Corporations Clifton Building
Tallah	assee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

BUBBLE				
(Name of the Limited Liability ((A Florida Li	Company as it now appears on our records.) mited Liability Company)			
The Articles of Organization for this Limited Liability Con Florida document number <u>L06000048</u>	mpany were filed on $\frac{5/10/2006}{365}$ and assigned			
This amendment is submitted to amend the following:	•			
A. If amending name, enter the new name of the limite	ed liability company here:			
RELIABLE LAW	V SERVICE LLC			
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	issu — Fill is T			
	三 三			
	SSEE OF THE PROPERTY OF THE PR			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	12: 2			
B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address on our records, <u>enter the name of the new</u> ess here:			
Name of New Registered Agent:	3			
New Registered Office Address:				
Enter Florida street address				
	, Florida			
	City Zip Code			
New Designation of Amenda Signature if the princip Designation	A 4.			

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 = Ma MGRM = N	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Zan Winnove T
			Addr Remeve
·			Z9
D. If amen	ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessar	
			······································
	NECEMBER 211 -	2000	
Dated	Signature of a reference	iber or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·
		EMIL PANTOTA ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00