

Jun. 2. 2010 4:26PM

business choice

No. 4094 Page 2 of 2

**L06000053785**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : BUSINESS CHOICE, INC.  
Account Number : I20010000004  
Phone : (954) 782-1829  
Fax Number : (954) 697-0245

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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10 JUN -2 PM 4:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**GOLDEN WIZARD SUN II, L.L.C.**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$60.00

**A. LUNT**

JUN -3 2010

**EXAMINER**

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Corporate Filing Menu

Help

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

**GOLDEN WIZARD SUN II, L.L.C.**

(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 05/24/06 and assigned  
Florida document number L06000053785.

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**)

2301 E. ATLANTIC BLVD.

POMPAN0 BEACH, FL 33062

Enter new mailing address, if applicable:

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

2301 E. ATLANTIC BLVD.

POMPAN0 BEACH, FL 33062

**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: \_\_\_\_\_

2301 E. ATLANTIC BLVD.

Enter Florida street address

POMPAN0 BEACH

, Florida

33062

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

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

2010 JUN -2 AM 10:24

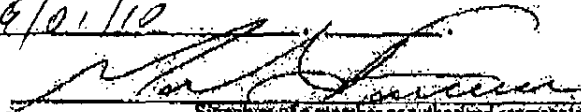
FILED

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

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

Dated

06/01/10



Signature of a member or authorized representative of a member

MARCO FONSECA

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00