## Loboobob33

(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:			
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Amend			

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08/30/06--01012--010 \*\*25.00

SECRETARISE OF STATE



August 31, 2006

LAURA SPAULDING 16185 RAMBLING VINE DR E TAMPA, FL 33624

SUBJECT: SPAULDING DEEON, LLC

Ref. Number: L06000060633

We have received your document for SPAULDING DEEON, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6851.

Gina McLeod Document Specialist

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Letter Number: 806A00053406

## **COVER LETTER**

	ation Section n of Corporations			
SUBJECT:	SPAULDING.	DECON, LL imited Liability Company)	<u></u>	
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The enclosed Ar	ticles of Amendment and fee(s) are s	e to the	. •	
Please return all	correspondence concerning this matt	er to the following:	E read to a standard Par	
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	16185 000013	Wi DOF		
	KAMBUA	(Address)		
		g Vine DR E (Address)	,	
	TAMPA, FL	- 336 24 v/State and Zin Code)		
	(Cit	y/State and Zip Code)		
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For further infor	mation concerning this matter, please	caii:		
1.	AUDA SMAINLding	813 . 2	198-7122	
	Laura Spaulding at (813) 298-7122 (Name of Person) (Area Code & Daytime Telephone Number)			
	•			
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	k for the following amount:		'	
\$25.00 Filing F	see \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &	
		(additional copy is enclose	ed) Certified Copy (additional copy is enclosed)	
	,		(additional copy is enclosed)	
	MAILING ADDRESS:	STREET/CO	URIER ADDRESS:	
	MAILING ADDRESS: Registration Section	Registration S	ection	
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	Tallahassee, FL 32314	2661 Executiv	e Center Circle	
	•	Tallahassee, F		
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SPAULOING DECON, LLC		
	(Present Name) (A Florida Limited Liability Company)		
	- · · · · · · · · · · · · · · · · · · ·		
FIRST:	The Articles of Organization were filed on $\frac{8-9-06}{33}$ and assigned document number $\frac{\cancel{L} \circ (0000060633)}{\cancel{L} \circ (0000060633)}$ .		
SECOND:	This amendment is submitted to amend the following:		
	THE NAME OF THE COMPANY WAS		
	MISSPELLED. THE CORRECT NAME OF THE		
	COMPANY IS SPAULOING DECON, LLC. THE WORD		
	"DECON" WAS SPELLED "DEEON" ALSO PLEASE		
	CHANGE THE REGISTERED AGENT FROM RELLIE		
	DANIEL TO LAURA SPAULONG, LAURA SPAULONE	,	
	'S THE OWNER REGISTERED AGENT, AND MANAGER.		
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Dated	Hug 26, 2006.	:SI W	
	Laura Saulding	24	
	Signature of a member or arthorized representative of a member		
	LAURA SPAULDING Typed or printed name of signee		

Filing Fee: \$25.00

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Laura Spaulding 16185 Rambling Vine Dr E Tampa, FL 33624

Re: Registered Agent

## To Whom It May Concern:

I have received a letter from Document Specialist, Gina McLeod advising that I need to write a letter indicating acceptance as a registered agent. I hereby am familiar with and accept the duties and responsibilities as registered agent for said limited liability company, Spaulding Decon. My name and my name only should be used in reference to this company as the sole owner, registered agent, and responsible party. Please contact me if you need anything further.

Thank you,

Laura Spaulding 1978 And 1974 and the condition of the co

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