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SECRETARY OF STATE OIVISION OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: FCF DELRAY 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:
FLAVIE FURST (Name of Person)
(Name of Person)
FLAVIE FURST
(Firm/Company)
ZOZS LAVERS CIRCLE
DELRAY BEACH FL 33444  (City/State and Zip Code)
(Chyrotaec and Esp Code)
For further information concerning this matter, please call:
FLAVIE FURST at (56) 266-9558 (Area Code & Daytime Telephone Number)
(Name of Person) at (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, 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

(Present Name) (A Florida Limited Liability Company)

DELRA

FCF

FIRST: SECOND:	The Articles of Organization were filed on 7-21-06 and assigned document number  LOGOGOTZT87  This amendment is submitted to amend the following:  NAMC CMANGE:  FCF DELRAY LLC To	' כ
	FLAVIE FURST LLC	
Dated	Signature of a member or authorized representative of a member  FLAVIE FURST	

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE