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S. HAWKES

APR 6 2010

EXAMINER

## **COVER LETTER**

losed)

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

LUV I AM,	LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)		
The Articles of Organization for this Limited Liability Company we Florida document number <u>LOGOOO37155</u> .			
This amendment is submitted to amend the following:	PHIS: 4.		
A. If amending name, enter the new name of the limited liabil	O/		
LOVE RESONANCE, LL The new name must be distinguishable and end with the words "Limite	C		
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	NA		
B. If amending the registered agent and/or registered office address here:			
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:	V/A		
	Enter Florida street address		
	, Florida		
	City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre- the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete performance of my duties, and I am familiar with and rovided for in Chapter 608, F.S. Or, if this document is		

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>	Address	Type of Action		
	N/A		Add Remove		
<del></del>	N/A		O PR		
	NA		Add's Remove ROOF STATE OF STA		
	N/A		Add Remove		
	NA		AddRemove		
<del> </del>	N A	•	Add Remove		
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)			
			_		
Dated	March 31,	_			
		nber or authorized representative of a member  a Torrella  rped or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00