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EXAMINER



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SECRETARY OF SILVE DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:	(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:						
	RICK ROUSSEY					
	(Name of Person)					
	RICK ROUSSEY (Name of Person) MARITA ROUSSEY AP LLC (Firm/Company)					
	Om a series of an an art and are					
	2750 STICKNEY PT RD SUITE 207					
	SARASOTA FL 34231					
	(City/State and Zip Code)					
For further information concerning this matter, please call:						
RICK ROUSSEY	*1.941,923-7203					
(Name of I	erson) at (941) 923-2263 (Area Code & Daytime Telephone Number)					
Enclosed is a check for the						
\$25.00 Filing Fee	\$30.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & 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



MARITA KUSE		1	·			
(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 Lial Florida document number	bility Company were filed on	9-18-200	and assigned			
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of the MARITA ROUSSEY		<u>re</u> :				
The new name must be distinguishable and end with "L.L.C."		pany," the designation "	LLC" or the abbreviation			
B. If amending the registered agent and/or registered agent and/or the new registered offi		our records, <u>enter</u>	the name of the new			
Name of New Registered Agent:	MARITA RO	DUSSEY				
New Registered Office Address:	TRV SUITE					
	SARASOTA		•			
	(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 = Managing Member					
<u>Title</u>	Name	Address	Type of Action		
			Add Remove		
	-		Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
	_		Add Remove		
D. If a		nge(s) here: (Attach additional sheets, if necessary, -1CATE ENCLOSEN) CHANGE ENCLOSEN)		
Dated _		per or authorized representative of a member			
	Signature of a member PICK POVSSE Type	per or authorized representative of a member Get or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00