## L06000088243

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

C Division of C	orporations	•					
SUBJECT:	Team	Team Raydiance LLC					
		nited Liability Company					
The enclosed Articles	of Amendment and fee(s) are su	ubmitted for filing.					
Please return all corres	pondence concerning this matte	er to the following:					
		Keith Hancock					
	Name of Person						
Team Raydiance LLC							
Firm/Company							
	942 W. Lumsden Rd.						
		Address					
	Brandon Fl. 33511						
	City/State and Zip Code						
	Raydiance71@msn.com  E-mail address: (to be used for future annual report notification)						
For further information	concerning this matter, please	call:					
Keith Hancock		at ( 813 )	966-3173				
Name	of Person	Area Code & Da	ytime Telephone Number				
Enclosed is a check for	the following amount:						
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

то

Registration Section

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



November 16, 2009

KEITH HANCOCK 942 W. LUMSDEN ROAD BRANDON, FL 33511

SUBJECT: TEAM RAYDIANCE, LLC

Ref. Number: L06000088243

We have received your document for TEAM RAYDIANCE, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6067.

Letter Number: 309A00035626

Neysa Culligan Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
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(Name of the Limited (A	Team Rayo Liability Compa Florida Limited I	liance LLC ny as it now appears Liability Company)	TALLAHAS on our records. AS	SEE. FLORIDA		
The Articles of Organization for this Limited Life Florida document number		were filed on	09/08/2006	and assigned		
This amendment is submitted to amend the follo	owing:					
A. If amending name, enter the new name of	the limited liab	ility company here	:			
The new name must be distinguishable and end wit "L.L.C."	h the words "Lim	ited Liability Compar	y," the designation "I	LLC" or the abbreviation		
Enter new principal offices address, if applic	942 W. Lumsden Rd.					
(Principal office address MUST BE A STREE	Brandon Fl. 33511					
Enter new mailing address, if applicable:	942 W. Lumsden Rd.					
(Mailing address MAY BE A POST OFFICE .	Brandon Fl. 33511					
B. If amending the registered agent and/oregistered agent and/or the new registered of			ır records, <u>enter t</u>	he name of the new		
Name of New Registered Agent:	ame of New Registered Agent: Ricky L. Thacker					
New Registered Office Address:	sden Rd.					
	Enter Florida street address					
		Brandon	, Florida	33511		
		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 <u>Title</u> <u>Name</u> **Address Type of Action** Donald L Cohagen Mem ∏ Add ✓ Remove 89 Martinique Tampa FI 33606 Steve Rossiter MGRM 11120 Casa Loma Dr Riverview Fl 33569 MGRM Keith Hancock 803 Scenic Heights Dr ✓ Add Brandon Fl. 33511 Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 2, 2009 Dated\_ Signature of a member of authorized representative of a member Keith Hancock Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00