

LD6000089518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

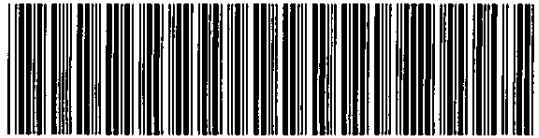
(Business Entity Name)

(Document Number)

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08 FEB 18 AM 11:12  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

B. T. Lock FEB 20 2008

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Loanomics 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:

Chris Salins  
(Name of Person)

Loanomics LLC  
(Firm/Company)

1151 North Ft. Lauderdale Bch Blvd  
(Address) #100

Ft Lauderdale FL 33304  
(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Salins at 954 214 1721  
(Name of Person) (Area Code & Daytime 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 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

Loahomics LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

08 FEB 18 AM 11:12  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

The Articles of Organization for this Limited Liability Company were filed on 9/12/06 and assigned  
Florida document number 206000089518

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Menu On Run LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Chris Salinas

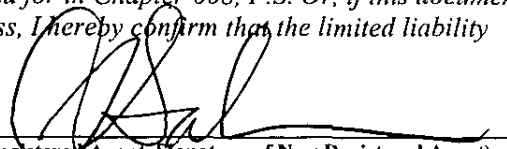
New Registered Office Address:

151 North Fort Lauderdale Beach Blvd  
Suite 100 (Enter Florida street address)

Fort Lauderdale, Florida 33304  
(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>	<u>Address</u>	<u>Type of Action</u>
Mr.	Chris Salinas	6524 NW 55 St Coral Springs FL 33067	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove MGR
Ms	Shruti Abrol	16572 NW 9th Ct Pembroke Pines FL 33028	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Mr.	Denis Salinas	6524 NW 55 St Coral Springs FL 33067	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

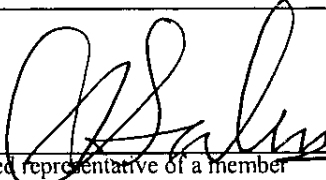
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated 2/12/2008



Signature of a member or authorized representative of a member

Typed or printed name of signer