L06000093337

(Requestor's Name)
(Address)
(Address)
(City/Chata/7in/Cityron 46)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusings Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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S. HAWKES

OCT - 2 2009

EXAMINER



September 11, 2009

ROMAN NAHIMYY 14920 PERDIDO DRIVE ORLANDO, FL 32828

SUBJECT: ROMAN'S CARPENTRY LLC

Ref. Number: L06000093337

We have received your document for ROMAN'S CARPENTRY LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved for failure to file the 2007 annual report/uniform business report and must reinstate before this document can be filed. Please see the attached fee schedule for a breakdown of the fees due.

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2007 through 2009; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$516.25.

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) 245-6967.

Letter Number: 909A00030173

Leslie Sellers Regulatory Specialist II

COVER LETTER

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:
Roman Nahimyy Name of Person
Firm/Company
14920 PERDIDO DR
Address
ORLANDO FL 32828
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Roman Nahirnyy at (407 8 538 0259 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount.
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$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

(A Florida Limited Li	Bothty Company)		
The Articles of Organization for this Limited Liability Company	were filed on <u>09 . 2</u>	1.2006an	Tassign &
FEI # 2056/6960			951-1
This amendment is submitted to amend the following:			199 P
A. If amending name, enter the new name of the limited liabi	lity company here:		20 R3
Nahirnyy Carpevita	LUC	————————————————————————————————————	8
The new name must be distinguishable and end with the words "Limit "L.L.C."	Nahiryy	Carpentry a	LLC.
Enter new principal offices address, if applicable:	Roman N	Jahirnyy	
(Principal office address MUST BE A STREET ADDRESS)	14920 P Orlando	Vahirnyy erdido Dr FL 32828)
Enter new malling address, if applicable:	11	11	
(Mulling address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		cords, enter the nan	ne of the new
Name of New Registered Agent:		·	
New Registered Office Address:		····	
	Enter Flo	rida street address	

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.

City

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:

MGRM = Managing Member Title **Name** Address Type of Action Yelena Nagirny ☐ Add Remove Add C Add 2. ∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,)

Page 2 of 2

Filing Fee: \$25.00

MGR = Manager