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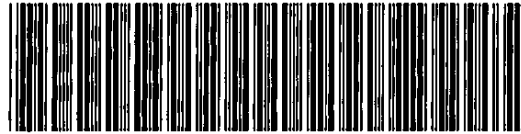
(Business Entity Name)

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12-4-06

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** R&D Strategies, 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:

Lauren M. Ilvento, Esq.  
(Name of Person)

The Draves Law Firm, P.A.  
(Firm/Company)

120 East Concord Street  
(Address)

Orlando, Florida 32801  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lauren M. Ilvento at ( 407 ) 423-1183  
(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

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**ARTICLES OF AMENDMENT**  
**TO**  
**ARTICLES OF ORGANIZATION**  
**OF**  
**R&D STRATEGIES, LLC**

The Articles of Organization were filed on October 9, 2006 and assigned document number L06000098248.

The Articles of Organization are amended and restated to amend Articles I through IV as provided below:

**ARTICLE I — Name**

The name of the Limited Liability Company is: R&D STRATEGIES, LLC.

**ARTICLE II — Address**

The mailing address and address of the principal office of the Limited Liability Company are: 6753 Kingspointe Parkway, Suite 107, Orlando, Florida 32819.

**Article III — Registered Agent, Registered Office**

The name and the street address of the initial registered agent is: Donna L. Draves, Esq., 120 East Concord Street, Orlando, Florida 32801.

**Article IV — Management**

The Limited Liability Company is to be managed by a manager or managers and is, therefore, a manager-managed company. The name and address of the initial manager of the company is: Lavinia Netane, 6753 Kingspointe Parkway, Suite 107, Orlando, Florida 32819.

**Article V — Effective Date**

These Amended Articles of Organization shall be effective as of December 4, 2006.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledge them to be my act this 11 day of November, 2006.

  
LAVINIA NETANE, Authorized Representative

EFFECTIVE DATE  
12-4-06

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STATE OF FLORIDA  
COUNTY OF ORANGE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to take acknowledgments in the State and County aforesaid, personally appeared LA VINIA NETANE, who presented Florida Driver's License as identification, known to me to be the person described in, and acknowledged before me that she executed, the foregoing Articles of Incorporation.

WITNESS my hand and official seal this 29<sup>th</sup> day of November, 2006.



Deborah A Samuel  
My Commission DD170991  
Expires January 12, 2007

Deborah A Samuel  
NOTARY PUBLIC, STATE OF FLORIDA

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DIVISION OF CORPORATIONS  
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#### STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in this statement. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

REGISTERED AGENT:

Donna L. Draves  
DONNA L. DRAVES

STATE OF FLORIDA  
COUNTY OF ORANGE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to take acknowledgments in the aforesaid State and County, personally appeared Donna L. Draves known to me to be the person described in, and who acknowledged before me that she executed, the foregoing Designation and Acceptance.

WITNESS my hand and official seal this 29<sup>th</sup> day of November, 2006.



Deborah A Samuel  
My Commission DD170991  
Expires January 12, 2007

Deborah A Samuel  
NOTARY PUBLIC, STATE OF FLORIDA