## LD6000100556

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SECRETARY OF STATE SECRETARSEE. FLORIDA

200.62

C. LEWIS

NOV 5 2009

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Sect Division of Corpo	ion crations				
SUBJEC	CT:	Stratuspoint, LLC				
		Name of Limi	ited Liability Company			
The encl	osed Articles of Ar	mendment and fee(s) are sub	omitted for filing.			
Please re	eturn all correspond	lence concerning this matter	to the following:			
	Brandon Congleton					
			Name of Person			
			Firm/Company			
		13770 58th Street North Suite 317A				
			Address			
		Clearwater, FL 33764				
			City/State and Zip Code			
		E-mail address: (	istyred25@yahoo.com to be used for future annual report notific	ation)		
For furth	er information con	cerning this matter, please c	all:			
		sty Daniel		89-8910		
Name of Person			Area Code & Daytime	Telephone Number		
Enclosed	is a check for the	following amount:				
\$25.0	00 Filing Fee [	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: Registration Section		STREET/COURIE Registration Section				

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Stra	atuspoint, LLC		TALLAHASSEL
( <u>Name of the Limited Liability</u> (A Florida)	Company as it now appears Limited Liability Company)	on our records.	
The Articles of Organization for this Limited Liability C Florida document number L06000100556	Company were filed on	10/16/06	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here	:	
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Compar	ny," the designation	1 "LLC" or the abbreviation
Enter new principal offices address, if applicable:		<u></u> .	
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add		ur records, <u>ente</u>	r the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Enti	er Florida street (	address
		Florida	
	City	, riorida	Zin 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 Title **Name** <u>Address</u> **Type of Action** MGRM **Brandon Congleton** "Name Mispelled" 9122 Birch Drive ☐ Add Largo, FL 33773 Remove ☐ Add Remove \_\_\_ Add Remove Remove □Add Remove ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 3 2009 Dated signature of a member or authorized representative of a member

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Filing Fee: \$25.00

Brandon Congleton
Typed or printed name of signee