

LD6000100878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

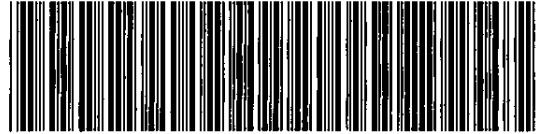
(Document Number)

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2009 NOV -2 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

C. LEWIS

NOV 3 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 22, 2009

GARCIA LLC / RAMON GARCIA JR.  
3016 PETER AVE. #A  
NAPLES, FL 34112

SUBJECT: GARCIA "LLC"  
Ref. Number: L06000100878

We have received your document for GARCIA "LLC" and check(s) totaling \$521.25. However, the document has not been filed and is being retained in this office for the following reason(s):

The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 109A00033694

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Garcia "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:

Ramon Garcia Jr  
Name of Person

Firm/Company

3016 Peter Ave # A  
Address

Naples, FL 34112  
City/State and Zip Code

TitanGarcia@Live.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ramon Garcia Jr at (239) 438-1360  
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

FILED

2009 NOV -2 AM 10:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

The Articles of Organization for this Limited Liability Company were filed on 10-17-06 and assigned  
Florida document number 206000100878

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5336 McCarty Ct  
Naples, FL 34113

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3016 Peter Ave #A  
Naples, FL 34112

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:

New Registered Office Address:

Enter Florida street address

Florida

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

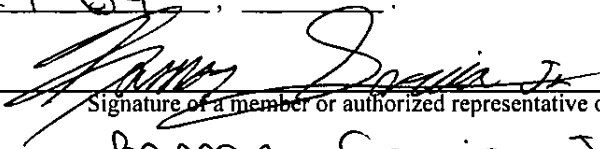
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Ramon Garcia Jr	2016 Peter Ave #A Naples, FL 34112	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Ramon Garcia Sr	5336 MC carty ct Naples, FL 34113	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Ton, Garcia	5336 MC carty ct Naples, FL 34113	<input checked="" type="checkbox"/> Add <input 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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated

10-29-09



Signature of a member or authorized representative of a member

Ramon Garcia Jr

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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