

L06000104406

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6363

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : 120070000020
Phone : (813) 435-3176
Fax Number : (813) 333-6358

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN.
FABULOUS ASSEMBLAGE EQUIPMENT, LLC**

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS
13 MAY -6 AM 8:41

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FABULOUS ASSEMBLAGE EQUIPMENT, 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 10/26/2006 and assigned
Florida document number L06000104406

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This amendment is submitted to amend the following:

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

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)

5128 WEST IDLEWILD AVENUE

SUITE B

TAMPA, FLORIDA 33634

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5128 WEST IDLEWILD AVENUE

SUITE B

TAMPA, FLORIDA 33634

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

City, Florida

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

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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>
MGR	MARIANELLA LEON	18952 NORTH DALE MABRY HIGHWAY	<input type="checkbox"/> Add
		SUITE 102	<input checked="" type="checkbox"/> Remove
		LUTZ, FL 33548	
MGRM	BRENDA K. STEWART	5128 WEST IDLEWILD AVENUE	<input checked="" type="checkbox"/> Add
		SUITE B	<input type="checkbox"/> Remove
		TAMPA, FLORIDA 33634	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 05/03, 2013

86 Signature of a member or authorized representative of a member
NICKOLAS J. SPRADLIN AUTHORIZED REPRESENTATIVE
Typed or printed name of signee

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