Office Use Only

G. MCLEOD

AUG 27 2008

**EXAMINER** 



000134637730

08/26/08--01028--001 \*\*25.00

## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:	Recogni	tionArt		
50202011			ited Liability Company)	
The enclosed	Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Larry Greenwald		
			(Name of Person)	
		RecognitioinArt		
			(Firm/Company)	
		5045 Robinsong Rd		
			(Address)	
		Sarasota, FL 34233		
			(City/State and Zip Code)	
For further in	formation con	ncerning this matter, please c	ali:	
Larry Greenwald			at ( 941 ) 924-1849	
	(Name of	Person)	(Area Code & Daytime T	'elephone Number)
Enclosed is a	check for the	following amount:		
<b>21 \$25.00</b> Fi	ling Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

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

RecognitionArt				
(Name of the Limited Li (A F	ability Compa orida Limited I	ny as it now appears on ou Liability Company)	r records.)	
he Articles of Organization for this Limited Liab	and assig	and assigned		
lorida document numberL06000110041	······································			
his amendment is submitted to amend the follow	ing:			
. If amending name, enter the new name of th	ne limited liab	oility company here:		
he new name must be distinguishable and end with t L.L.C."	he words "Lim	ited Liability Company," the	J	breviation
Enter new principal offices address, if applicab	le:	5045 Robinsong Rd	08 A	SEC VISIC
Principal office address MUST BE A STREET ADDRESS		Sarasota, FL 34233	U6 <b>2</b> 6	RETAR
Enter new mailing address, if applicable:		5045 Robinsong Rd	PH :	S de la constant de l
Mailing address MAY BE A POST OFFICE BO	Sarasota, FL 34233	12	<u> </u>	
3. If amending the registered agent and/or registered agent and/or the new registered office		<u>e</u> :	ords, <u>enter the name of</u>	the new
Name of New Registered Agent:	aru	<u> </u>		
New Registered Office Address:	5045 Robinso	<del></del>		
		(Enter Flo	rida street address)	
	Sarasota,	<u> </u>	, Florida 34233	
		(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		Those chang	lot male
Title	Name	Those Changes	1, 200 K Type of Ac
MGRM	Larry Greenwald	5045 Robinsong Rd Sarasota.	
MGR	Torey Greenwald	5045 Robinsong Rd., Sarasota, FL 34233	
MGR	Shelley Greenwald	5045 Robinsong Rd Sarasota, FL 34233	
MGR	Allison Wampole	1614 13th St. West Palmetto. FL	
MGR	Renee Borgias	7020Treymore Ct. Sarasota, FL 34	
<del></del>			Damaria
D. If amend	ding any other information, ente	r change(s) here: (Attach additional sheets, if	necessary.)
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Dated 8-25	2008 ,		
	Sionature of a	member or guthorized representative of a member	
	1	Decy (Lea 11 - 1	