L07000017385

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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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IN OCT 24 PH 4: 10

C. LEWIS

OCT 212008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: PATHA	NA GROUP ONE, L	LC	
•	(Name of Limi	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Alvaro Castillo, Esquire		
		(Name of Person)	
	Castillo & Associates		
		(Firm/Company)	
	1390 Brickell Avenue, Su	uite 200	
		(Address)	
	Miami, FL 33131		
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Alvaro Castillo		at (305) 371-5540	
	of Person)	(Area Code & Daytime T	'elephone Number)
Enclosed is a check for t	he 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:

TO:

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



October 21, 2008

ALVARO CASTILLO, ESQ. CASTILLO & ASSOCIATES 1390 BRICKELL AVE., STE. 200 MIAMI, FL 33131

SUBJECT: PATHANA GROUP ONE LLC

Ref. Number: L07000017385

We have received your document for PATHANA GROUP ONE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P07000012213 (CJD VENTURE INC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 408A00054548

Carolyn Lewis Regulatory Specialist II

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2000 OCT 24 PM 4: 10

SEURETARY OF STATE TALLAHASSEE, FLORIDA

	A GROUP ONE, LLC	MELAMOSELFIEOMS
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on c Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Conference of Organization for this Limited Liability Conference of Conf	ompany were filed on February	15, 2007 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
CJDT Ventures, LLC		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," t	ne designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	 	
(Principal office address MUST BE A STREET ADDR	NESS)	
	· ·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		ecords, enter the name of the new
Name of New Registered Agent:		·
New Registered Office Address:	(Enter F	lorida 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 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> **Address Type of Action** Add ☐ Remove ☐ Add ☐ Remove Add 🗂 Remove ☐ Add Remove Remove **∫** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 16 Signature of a member or authorized representative of a member Genaro Diaz Typed or printed name of signee Page 2 of 2 Filing Fee: \$25.00