L07000019999

(Requestor's Name)		
(Address)		
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(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special instructions to 1 ming Cinical.		
A. LUNT		
AUG 13 2008		
EXAMINER		

Office Use Only



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08/11/08--01030--017 **25.00

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Or tegal Mason ry 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:
Abel Jr. Ortega-Rucolba (Name of Person)
(Firm/Company) 4173 Drewdy Rd (Address) Plant City FL 33563 HE ARY (City/State and Zip Code)
For further information concerning this matter, please call:
Maria Fuertes at (813) 477- 44577 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy} \\ \text{(additional copy is enclosed)} (additiona

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

	bility Company as it now appears on ordina Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabil		
This amendment is submitted to amend the following	ng:	•
A. If amending name, <u>enter the new name of the</u>	e limited liability company here:	
The new name must be distinguishable and end with th "L.L.C." Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A)	e:	the designation "LLC" or the abbreviation SECRETARY FES
Enter new mailing address, if applicable:		1: 3 STA E .OR D
(Mailing address MAY BE A POST OFFICE BO) B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our r	records, enter the name of the new
Name of New Registered Agent: New Registered Office Address:	NA	
	(Enter I	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 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>Address</u> **Type of Action** <u>Name</u> Abel Ortega Add 🗖 Remove ☐ Add Remove 🗖 Add Remove □ Add Remove Add 🗖 Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Office Records
Signature of a member or authorized representative of a member Or lega Rucoba
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00