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G. MCLEOD EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Maximus of Limited Liability Company)  (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:
Name of Person)
Hacimus of Worth America
-7345 W Gard Lake Rd Svite 209
Orlando, FL, 32819 (City/State and Zip Code)
For further information concerning this matter, please call:
Tedwin Rosovia at (40) 583-48-75 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \$\ \text{Certified Copy}\$ (additional copy is enclosed) \$\ \text{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

FILED SECRETARY OF STATE DIVISION OF CORPORATION

# ARTICLES OF AMENDMENT

# TO

08 APR 10 PM 3:51

ARTICLES OF ORGANIZATION

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· (Name of the Limited	A Florida Limited Liability Company)	recorus.
The Articles of Organization for this Limited L	iability Company were filed on	and assigned
Florida document number	·	
This amendment is submitted to amend the foll	lowing:	
A. If amending name, enter the new name o	of the limited liability company here:	
The new name must be distinguishable and end wi "L.L.C."	ith the words "Limited Liability Company," the	designation "LLC" or the abbreviation
B. If amending the registered agent and/ registered agent and/or the new registered of	<del>-</del>	rds, enter the name of the new
Name of New Registered Agent:  New Registered Office Address:	Neich Rosario 7345 W Sand Le (Enter Flor	ave Rd Suite 2009 ida street address)
	$\wedge$	Florida 32819 (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, V.S. Or, if this document is being filed to merely reflect a change in the registered office address, 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	1 = Managing Member		
<u>Title</u>	Name	Address	Type of Action
	Neida Rosario	8180 Book Hook Lapt 306 Windermere Fl 34786	Add Remove
	Harisol Bosarw		Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
			Add Remove
D. If ar	.) \ \	e(s) here: (Attach additional sheets, if necessary.)  5 to: 7345 (W. Sarc  59 October 71 328)	1
Dated _		or authorized representative of a member	
	town	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00