

LO7 0000 303 11

(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:

Office Use Only



200123850902

04/17/08--01056--008 **25.00

FILED
2008 APR 17 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

APR 18 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FINDERS DIVERSIFIED INTERNATIONAL 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:

MARK SCHIFF

(Name of Person)

BUSINESS FILING INCORPORATED

(Firm/Company)

8025 EXCELSIOR DR, SUITE 200,

(Address)

MADISON, WI, 53717

(City/State and Zip Code)

For further information concerning this matter, please call:

MARK SCHIFF

(Name of Person)

at (608) 827-5300

(Area Code & Daytime Telephone Number)

Enclosed is a check for the 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:
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
2008 APR 17 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FINDERS DIVERSIFIED INTERNATIONAL 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 20 MAR 2007 and assigned
Florida document number L07000030311.

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."

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)

_____, Florida _____
(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)

FILED
MAR 17 4:10:15
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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	LEVESQUE, MARIO	PO BOX 20451, TAMPA, FL, 33622	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	SOLOMON, ELHAM	13243 Evening Sunset Lane, Riverview, FL, 33569	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	PINNICK, WILLIAM	1142 Venetian Harbor Dr. Saint Petersburg, FL 33702	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	LUTY, CRAIG		<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

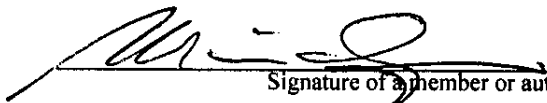
Article 5 "MANAGERS/MEMBERS" of the Articles of Organization is amended
to read as follows: The Company shall be manager-managed.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 APR 17 AM 10:15

FILED

Dated 22 MARCH, 2008



Signature of a member or authorized representative of a member

MARIO LEVESQUE, SECRETARY

Typed or printed name of signee