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SECRETARY OF STATE
TALLAHASSEE FLORIDA

T. HAMPTON

JUN 1 2 2008

**EXAMINER** 



## **COVER LETTER**

TO: Registration Solution of Con			, ,
SUBJECT:	Gator Dinz,	LL C	
	(Name of Em	med Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Joige	Sauz	
	J	(Name of Person)	
	Garton	(Name of Person)  Finz, LLC (Firm/Company)	
	613 Cc	الان الحال (Address)	
	Brunde	(Address)  A + C 33510  (City/State and Zip Code)	
		(City/State and Zip Code)	
For further information of	concerning this matter, please	call:	
Jorge	Sanz	at ( 913 ) 391 - 911 (Area Code & Daytime T	7
(Name	of Person)	(Area Code & Daytime T	'elephone Number)
Enclosed is a check for t	the following amount:		
□ \$25.00 Filing Fee	330.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

SEC	80	
SECRETARY (	JUN 1	
OF STATE	: <u>:</u>	ED
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Cotor Pinz, 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 4/6/2007 and assigned Florida document number 67000036867. 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: 613 Cerro (m Dr.
(Enter Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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)

Brandon , Florida 335 10 (Zip Code)

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> **Name Address** Type of Action mgru Herritt, James 51 West Wyoning Circle Add
Tumpa, FL 33611

mgru Torrealday, Javier R. 5006 West Dickens Avenue Add Remove Remove 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) , <u>Zøø8</u> . Signature of a member of authorized representative of a member Torge Sanz
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00