

LO7000042259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

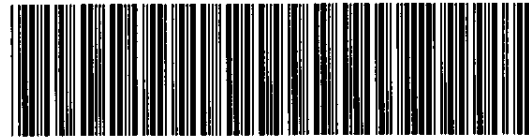
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

FEB - 6 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 13, 2012

MORAYMA ORTIZ  
1512 MAX HOOKS RD., SUITE D  
GROVELAND, FL 34736

SUBJECT: BEACH WEDDINGS IN FLORIDA, LLC  
Ref. Number: L07000042259

We have received your document for BEACH WEDDINGS IN FLORIDA, 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):

An individual must sign on behalf of the business entity you have designated as the registered agent.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return 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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 312A0000096

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 FEB -3 PM 3:06

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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Beach Weddings in Florida, 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:

Morayma Ortiz

Name of Person

Beach Weddings in Florida, LLC

Firm/Company

1512 Max Hooks Rd., Suite D

Address

Groveland, FL 34736

City/State and Zip Code

info@beachweddingsinflorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
Name of Person 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

2012 FEB 3 PM 3:05  
RECEIVED  
DIVISION OF STATE  
CORPORATIONS  
FLORIDA

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

**Beach Weddings in Florida, 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 April 20, 2007 and assigned Florida document number L07000042259.

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)**

1512 Max Hooks Rd., Suite D  
Groveland, FL 34736

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

1512 Max Hooks Rd., Suite D  
Groveland, FL 34736

**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:

Negrone Photographers, LLC

New Registered Office Address:

1512 Max Hooks Rd., Suite D

*Enter Florida street address*

Groveland

Florida

34736

*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**

Negrone Photographers, LLC

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	Morayma M. Ortiz	159 Cypress View Ln. Groveland, FL 34736	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Hector L. Vazquez	159 Cypress View Ln. Groveland, FL 34736	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input 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)*

Dated \_\_\_\_\_,

Signature of a member or authorized representative of a member

Morayma M. Ortiz

Typed or printed name of signee

FILED  
FEB - 3 2011  
CLERK OF DISTRICT COURT  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA