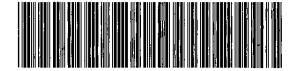
L07000061783

(Requestor's Name)
(requests, 5 ruline)
(Address)
(issuess)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT NOV - 5 2008
EXAMINER

Office Use Only



700137356117

11/03/08--01017--011 **30.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Lukait Property Maintenance, Lic. (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:
Jeanette Sanabria (Name of Person) Lakait Property Main, UC (Firm/Company) 1922 SE-7th Street (Address) Cape Coral, F1 33990 (City/State and Zip Code) For further information concerning this matter, please call:
Veanette Sanabria at (239) 673-7444 (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 Certified Copy (additional copy is enclosed) \$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company) (A Florida Limited L	ov as it now/appears on our records	nance, LLC
The Articles of Organization for this Limited Liability Company Florida document number <u>LO 70006178</u>	were filed on <u>6-11-0-7</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi" L.L.C."	ted Liability Company," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1922 SE7+	5 Street
(Principal office address MUST BE A STREET ADDRESS)	1922 SE7+1 Cape Coral	, FI 33990
Enter new mailing address, if applicable:	1922 SETH	h Street
(Mailing address MAY BE A POST OFFICE BOX)	Cape Cora	1, F1 33990
$\frac{\partial f}{\partial x}$, $f = e^{-ix} + e^{-ix}$, $e^{-ix} = e^{-ix}$	·	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		——————————————————————————————————————
registered agent and/or the new registered office address ner	<u>c</u> .	
Name of New Registered Agent:		SSR -3
New Registered Office Address:		
	(Enter Florida stre	eet address)
	, Florie	
	(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)

MGR = Mana MGRM = Ma	nger naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGR</u> M	John Joseph Mirabile	1922 SE 745 St Cape Com (, F1 3	3990 Add Remove
-			Add Remove
			→ dd demove
· · · · · · · · · · · · · · · · · · ·			Add Regiove
			Remove
			Add Remove
		nge(s) here: (Attach additional sheets, ij ipa) address and Caddress: 1922 af, Fl 33990.	
.~1	hange of phone	al number: (239) 67	3-7444
Dated	ct 28th, 20	lress 1453 SE 7th 108 Cape Coral,	St- F1 33990
_	Seline le signature of a membre de ane	the Sanabrial ed or printed name of signee	·

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:

Page 2 of 2

Filing Fee: \$25.00