L0700066072

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EXAMINER

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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FILED

COVER LETTER

Division of Cor	porations		
SUBJECT: ALDS,	LLC		
<u></u>		ited Liability Company)	
	Amendment and fee(s) are sub endence concerning this matter	•	
	Jeremy Anderson		
		(Name of Person)	
			200 TAI
(Firm/Company)			2009 APR -1 AMII: 05 SECRETARY OF STATE FALLAHASSEE. FLORID.
		- 200	9 APR - 1 AP
639 E. Colonial Drive, Ste 300 (Address)			SEE.
		(**************************************	OF S.
	Orlando, FL 32803		Lora III:
	**************************************	(City/State and Zip Code)	OS NDA NDA
For further information of	concerning this matter, please o	ail:	
Jeremy Anderson		at (386) 568-4573	•
(Name	of P er son)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for t	he 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:		STREET/COURIER	ADDRESS:

MAILING 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 C (A Florida Lin	ompany as it now appears on our record nited Liability Company)	F)
The Articles of Organization for this Limited Liability Con Florida document number <u>L07000066072</u>	mpany were filed on July 1, 2007	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
ALDS, LLC		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designat	,
Enter new principal offices address, if applicable:		2009 SE(TALL
(Principal office address MUST BE A STREET ADDRE	SS)	2009 APR
		ARY ASSE
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		RATIO
		> 0
B. If amending the registered agent and/or register registered agent and/or the new registered office address	ed office address on our records, <u>en</u> s <u>here</u> :	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida stre	et address)
	, Florid	
	(City)	(Zip Code)

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

Anderson Engineering 11.0

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)

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

Title Name **Address** Type of Action MGR Carlos Barrios 7672 Persian Court ■ ✓ Add Orlando, FL 32819 Remove Add Remove r Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Dated March 27 Signature of a member or authorized representative of a member Jeremy Anderson Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00