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## **COVER LETTER**

TO: Registration S Division of Co	
SUBJECT:	CATHEDRAL VENTURES, LLC
	(Name of Limited Liability Company)
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all corresp	ondence concerning this matter to the following:
	IRINA GRINEVICH
	(Name of Person)
	(Firm/Company)
	10167 W Survise Blyd #363
	Plantation, FC 33322 (City/State and Zip Code)
For further information of	concerning this matter, please call:
(Name	of Person) at (94) 101 – 5400 (Area Code & Daytime Telephone Number)
Enclosed is a check for t	he following amount:
<b>⊠</b> \$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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 OF

	DENTURES, LLC  ability Company as it now appears on our records.)  orida Limited Liability Company)
The Articles of Organization for this Limited Liabi	lity Company were filed on 10.10.2007 and assigned
This amendment is submitted to amend the followi	ng:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office agent and/or the new registered office agent.	registered office address on our records, enter the name of the new address here:    A SECRETAL AHAS   1   1   1   1   1   1   1   1   1
New Registered Office Address:	(Enter Florida street address) 9
-	, Florida DE (City) (City) (Ziv 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)

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>Tätle</u> Name <u>Address</u> Type of Action Ronald Friedman MARIM Add Remove Andrew Staubman Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signalure of a member of authorized representative of a member ROJ FRADMA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00