# LD7000079471

•			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
L. SELLERS JUN - 3 2010			
EXAMINER			

Office Use Only



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SECRETARY OF STATE

### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT:	Du Bie Co UC  Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are submitted for filing.		
Please return all correspo	ondence concerning this matter to the following:		
	Robert Dubis Name of Person		
	Dubie Co. Firm/Company		
	11 Crystal Waters Dr. Address		
	City/State and Zip Code		
	E-mail address: (to be used for future annual report notification)		
For further information c	oncerning this matter, please call:		
Rsb Name o	f Person at (863) 412-7623  Area Code & Daytime Telephone Number		
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Status Sta		

## 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



May 18, 2010

ROBERT DUBOIS 11 CRYSTAL WATERS DRIVE WINTER HAVEN, FL 33880

SUBJECT: DU BIE CO., LLC Ref. Number: L07000075471

We have received your document for DU BIE CO., LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Nothing was completed on the enclosed amendment form.

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) 245-6967.

Letter Number: 010A00012533

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF AMENDMENT --TO ARTICLES OF ORGANIZATION OF

Du Bie Co	o.UC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company value of Organization for this Liability Company value of Organization for the Organization for this Liability Company value of Organization for the Organization for t	were filed on 7 20 07 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
Lord is Good,	t a
The new name must be distinguishable and end with the words "Limite "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 here  Name of New Registered Agent:	
	<u> </u>
New Registered Office Address:	Enter Florida street address
	Florida F
	City Zip Code!
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and comple	
accept the obligations of my position as registered agent as pr	

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 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** <u>Name</u> **Address Type of Action** ☐ Add Remove Remove Add Remove ☐ Add Remove Add Remove  $\square$ Add Remove **D.** If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

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Filing Fee: \$25.00