L0700079549

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EXAMINER

COVER LETTER

TO:

Registration Section

Division of Co	rporations					
SUBJECT:	ADRIANA GAF	RCIA GUERRERO LL	_C			
	Name of Lim	ited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	ondence concerning this matte	r to the following:	•			
	А	DRIANA VILLARREAL				
		Name of Person				
	3340 GF	RAND CYPRESS DR NO	O 202			
		NAPLES FL 34119				
		City/State and Zip Code				
	ar	garcia90@comcast.net		دن تخر	259	
	E-mail address:	(to be used for future annual report	notification)		2	
For further information	concerning this matter, please	call:		10	2112 961 25	
				25.20 25.20 25.20	23	
	NA VILLARREAL	at (_239_)	821-2790	<u> </u>	>	
Name	of Person	Arca Code & Da	nytime Telephone Number		₹5 €5	
Enclosed is a check for	the following amount:				Ğ	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	losed) Certified	e of Status &		
Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ADRIANA GARCIA			·	_		
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	ability Company)	on our records.				
The Articles of Organization for this Limited Liability Company Florida document numberL0700079549	were filed on	08/02/2007	and	d assign	ied	
rionda document number						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabi	lity company here	:				
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Compar	y," the designation	"LLC" or	the abb	reviation	
Enter new principal offices address, if applicable:		<u> </u>		<u> </u>		
(Principal office address MUST BE A STREET ADDRESS)				<u>(</u>)	41,00.4.4	
•				<u> </u>	* ***	
					In Mary and	
Enter new mailing address, if applicable:				₹	Par com "	
(Mailing address MAY BE A POST OFFICE BOX)				Ü		
			*			
B. If amending the registered agent and/or registered off		ur records, <u>enter</u>	the nar	me of t	he new	
registered agent and/or the new registered office address here	:					
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Florida street address					
	, Florida					
	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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** MGR **ADRIANA GARCIA** 3340 GRAND CYPRESS DR NO 202 √ Remove NAPLES FL 34119 MGR ADRIANA VILLARREAL 3340 GRAND CYPRESS DR NO 202 ✓ Add Remove NAPLES FL 34119 _ Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 22 2012 Dated __ Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

ADRIANA GARCIA

Filing Fee: \$25.00