

207000080071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

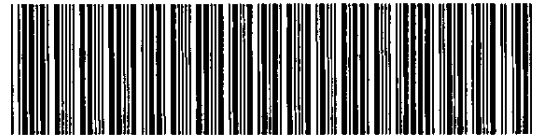
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

SEP - 6 2013

A. LUNT

Office Use Only



500250995945

09/03/13--01030--023 **25.00

FILED
2013 SEP -3 PM 1:31
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **HELP PC ONLINE LLC**

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:

SHAMSHER R CHAUHAN

Name of Person

HELP PC ONLINE LLC

Firm/Company

9187 BOGGY CREEK RD, SUITE 4

Address

ORLANDO, FL 32824

City/State and Zip Code

rchauhan@olympiaclothing.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sujata Tarneja

Name of Person

407 948-0831

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the 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:

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

2013 SEP -3 PM 1:31
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

HELP PC ONLINE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/3/2007 and assigned
Florida document number L07000080071.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9187 BOGGY CREEK ROAD

SUITE 4

ORLANDO, FL 32824

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9187 BOGGY CREEK ROAD

SUITE 4

ORLANDO, FL 32824

2013 SEP -3 PM 1:31
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

9187 BOGGY CREEK ROAD, SUITE 4

Enter Florida street address

ORLANDO

Florida 32824

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

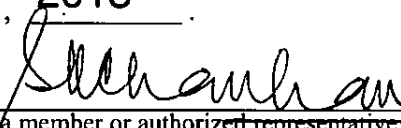
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	SHAMSHER R CHAUHAN	9187 BOGGY CREEK RD	<input checked="" type="checkbox"/> Add
		SUITE 1	<input type="checkbox"/> Remove
		ORLANDO, FL 32824	
MGRM	SHAMSHER R CHAUHAN	9088 POINT CYPRESS DR	<input type="checkbox"/> Add
		ORLANDO, FL 32836	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2013 SEP -3 PM 1:31
 FILE
 CLERK OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated AUGUST 27, 2013



Signature of a member or authorized representative of a member

SHAMSHER R CHAUHAN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 SEP -3 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED