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To: Division of Corporations	80
Fax Number : (850)617-6383	NON
From:	Ъ.
$\mathbf{X} = \mathbf{A} + $	
Account Name : GARY, DYTRYCH & RYAN, P.A.	3700
Account Number : 119990000255	AH 8
Account Number : I19990000255	AM 8: 5
Account Name : GARY, DYTRYCH & RYAN, P.A.	

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08-NOV-06	02:51PM	FROM-Gary,Dytrych & Ryan, P.A.	5618442388	-1, -1, -1, -002/003 F-885
		T ARTICLES OF (	AMENDMENT O ORGANIZATION OF	ÓB NOV -6 AM 8:54 SECRETARY OF STATE TALLAHASSEE FLORIDA
	D	)+ J Custom Remo (Name of the Limited Liability Comp. (A Florida Limited	deling U.C. any as it now appears on o Liability Company)	
The Article Florida doe	-	nization for this Limited Liability Company	01-	and assigned
This amen	dment is su	ibmitted to amend the following:		
A. If ame	nding nan	ne, enter the new name of the limited lia	<u>bility company here</u> :	
The new na "L.L.C."	me must be	distinguishable and end with the words "Lin	uited Liability Company," th	e designation "LLC" or the abbreviation
Enter new	r princlpal	offices address, if applicable:		
(Principal	office add	ress MUST BE A STREET ADDRESS)		
Enter nen	v mailing a	ddress, if applicable:		
<u>(Mailing a</u>	<u>ddress M</u> A	<u>Y BE A POST OFFICE BOX)</u>		
		e registered agent and/or r <del>e</del> gistered o Vor the new registered office address he		cords, <u>enter the name of the new</u>
ľ	lame of Ne	w Registered Agent:		· · · · · · · · · · · · · · · · · · ·
N	lew Regist	ered Office Address:		
			(Enter Fl	orida street address)
			(City)	_, Florida (Zip Code)
New Regist	tered Agen	t's Signature, if changing Registered Agent		(are arrest
			-	• • • • • • • • • • • • • • • • • • •
- 1 nereby a	iccept the i	appointment as registered agent and ag	ree to act in this capacit	v. I turther agree to comply with

I hereby accept the appointment as registered agent and agree to act in this capacity. I jurther agree to comply with the provisions of all statutes relative to the proper and complete performance of my dutics, 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)

Page 1 of 2

((CH080002514263)))

## • 08-NOV-06 02:51PM FROM-Gary.Dytrych & Ryan, P.A.

5618442388 T-078 P.003/003 F-885 ((( # USUOU 2517 24 511)

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>	Name	Address	Type of Action
	Joseph Ranieri	701 US Highing One #402 North Palk Beach, A. 33400	Add Remove
MGR	David Swann	9356 Keaturg Dr. Palm Brach abudens FL 33410	Add Remove
			Add Remove
- <u></u>			Add Remove
			Add Remove
	·····		Add Remove

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

Dated	TALLAHASSEEFLORIDA	08 NOV -6 AM 8: 54	
	Signature of a member or authorized representative of a member		
	Typed or printed name of signce	-	
	Page 2 of 2		
	Filing Fee: \$25.00		
	(CC H080002514	26	317)