# L07000088769

| (Requestor's Name)                      |                    |             |  |  |  |
|---|--------------------|-------------|--|--|--|
| (Address)                               |                    |             |  |  |  |
| (Address)                               |                    |             |  |  |  |
| (Ci                                     | ty/State/Zip/Phone | e #)        |  |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL MAIL   |  |  |  |
| (Bu                                     | isiness Entity Nar | me)         |  |  |  |
|   |                    |             |  |  |  |
| (Do                                     | ocument Number)    |             |  |  |  |
| Certified Copies                        | _ Certificates     | s of Status |  |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |  |
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Office Use Only



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FEB 1 8 2014

T. BROWN

### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: FIDOSAN, 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:

# PAULA C DOS SANTOS

Name of Person

FIDOSAN, LLC.

Firm/Company

10885 N.W. 85 TERRACE

Address

**DORAL, FL 33178** 

City/State and Zip Code

paulacr19@gmail.com

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

For further information concerning this matter, please call:

## PAULA C DOS SANTOS

.786**.369-9189** 

Name of Person

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)

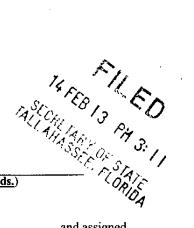
#### MAILING ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FIDOSAN, 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 we Florida document number L0700088769  | vere filed on 08/29/2007   | and assigned                      |
|---|--|-----------------------------------|
| This amendment is submitted to amend the following:   |  |                                   |
| A. If amending name, enter the new name of the limited liability  | ity company here:  |                                   |
| The new name must be distinguishable and end with the words "Limite "L.L.C."  | d Liability Company," the designation "LLC   | " or the abbreviation             |
| 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:  |  | name of the new                   |
|   |  |                                   |
| New Registered Office Address:  | Enter Florida street addres  | s                                 |
|   | F124-  |                                   |
|   | , Florida<br>City  | Zip Code                          |
| New Registered Agent's Signature, if changing Registered Agent:   |  |                                   |
| I hereby accept the appointment as registered agent and agree<br>the provisions of all statutes relative to the proper and comple<br>accept the obligations of my position as registered agent as po-<br>being filed to merely reflect a change in the registered office of<br>company has been notified in writing of this change. | ete performance of my duties, and I am<br>covided for in Chapter 60 <b>5</b> F.S. Or, if i | familiar with and his document is |

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 |
|--------------|-------------------|-----------------------|----------------|
| MGRM         | FILARDO, EILING C | 10885 N.W. 85 TERRACE | Add            |
|              |                   | DORAL, FL 33178       | Remove         |
|              |                   |                       | <del></del>    |
|              |                   |                       | Add            |
|              |                   |                       | Remove         |
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|              |                   |                       | Add            |
|              |                   |                       | Remove         |
|              |                   |                       | _              |
|              |                   |                       | <br>Add        |
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|              |                   |                       | _              |
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|              |                   |                       | Remove         |
|              |                   |                       | _              |
|              |                   |                       | Add            |
|              |                   |                       | Remove         |
|              |                   |                       |                |

| . If amending ar | y other information, (                | enter change(s) her   | re: (Attach additional s | heets, if necessary.) |
|------------------|---------------------------------------|-----------------------|--------------------------|-----------------------|
| <del></del>      | <u> </u>                              |                       |                          |                       |
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| ated JANUA       | RY 24                                 | 2014                  |                          |                       |
| ated             | · · · · · · · · · · · · · · · · · · · | -/ <i>Fi-(</i> )      | $\cdot \cap 1$           |                       |
|                  |                                       | ballo los             | Sonto                    |                       |
|                  | Signature                             | e of a member of auth | orized representative of | rmember               |
| PA               | ULA C DOS \$                          | SANTOS                |                          |                       |
| <del></del>      |                                       | Typed or print        | ed name of signee        |                       |

Page 3 of 3

Filing Fee: \$25.00