

L07000105309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

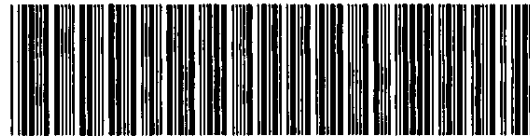
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600242398936

12/10/12--01030--005 \*\*25.00

FILED  
12 DEC 10 PM 4:33  
TALLAHASSEE, FLORIDA

B. BOSTICK  
DEC 11 2012  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GOZOOKO, 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:

**Maria Jaufmann**

Name of Person

**Gozooko, LLC**

Firm/Company

**7012 Palmetto Pines Lane**

Address

**Land O Lakes, FL 34637**

City/State and Zip Code

**maria@gozooko.com**

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

For further information concerning this matter, please call:

**Maria Jaufmann**

Name of Person

at **813 787-5655**

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

**FILED**  
12 DEC 10 PM 4:33  
TALLAHASSEE, FLORIDA

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

**GOZOOKO, 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 10/16/2007 and assigned  
Florida document number L07000105309.

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)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**FILED**  
12 DEC 10 PM 4:33  
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: \_\_\_\_\_

*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, 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	Maria E Jaufmann	7012 Palmetto Pines Lane	<input checked="" type="checkbox"/> Add
		Land O Lakes, FL 34637	<input type="checkbox"/> Remove
MGRM	Bryan	Bryan J Rodriguez	<input type="checkbox"/> Add
		2209 COLLIER PARKWAY, #325	<input checked="" type="checkbox"/> Remove
		Land O Lakes, FL 34637	
			<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

FILED  
12 DEC 10 PM 4:33  
CLERK OF DISTRICT COURT  
PALM BEACH, FLORIDA

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

---

---

---

---

---

Dated 12-7, 2012.

Maria E. Kaufmann  
Signature of a member or authorized representative of a member

Maria E. Kaufmann  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
12 DEC 10 PM 4:33  
TALLAHASSEE, FLORIDA