

LO7000117182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

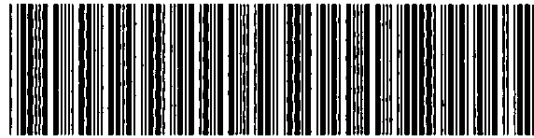
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



600119677956

03/10/08--01020--006 \*\*55.00

FILED  
08 MAR 10 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. Gulligan MAR 11 2008

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Euphoric Lifestyles 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:

Trent Martinez

(Name of Person)

Euphoric Lifestyles LLC

(Firm/Company)

3315 East Oakland Park Blvd. Suite 206

(Address)

Fort Lauderdale, Fl. 33308

(City/State and Zip Code)

For further information concerning this matter, please call:

Trent Martinez

(Name of Person)

at ( 954 ) 270-7067

(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**

Euphoric Lifestyles 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 March 7 2008 and assigned  
Florida document number L07000117182

**FILED**  
MAR 10 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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."

**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: Trent Martinez

New Registered Office Address: 3315 East Oakland Park Blvd. Suite 206  
(Enter Florida street address)

Fort Lauderdale, Fl. 33308, Florida 33308  
(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

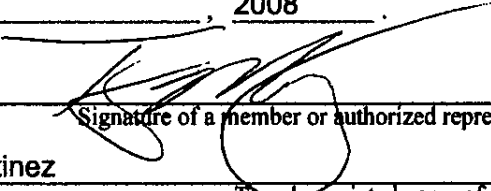
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGMR	James Horky	2601 NE 13th St. Fort Lauderdale, FL 33304	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

2 Cosigners required for the opening of any bank accounts, merchant accounts,  
contractual obligations, and or any other legal related matters.

Each managing member constitutes an equal 25% owning interest in Euphoric  
Lifestyles LLC. 51% or greater majority vote required for approval of corporate  
activity including expulsion of any and all owners of Euphoric Lifestyles, LLC.

Dated March 7, 2008

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Trent Martinez  
\_\_\_\_\_  
Typed or printed name of signer

FILED  
08 MAR 10 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA