# L07000121744

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SECRETARY OF STATE
TALLAHASSEF FI TOBIC.

M. THOMAS

DEC 16 2009

**EXAMINER** 

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

### SUBJECT: ASBESTOS & MESOTHELIOMA AWARENESS GROUP, LL

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:

		Raymond Apelado			
		Name of Person			
	ASBESTOS & MES	OTHELIOMA AWARENESS (	SROUP, L		
		Firm/Company			
	20 North	Orange Avenue, Suite 1450			
		Address			
·		Orlando, Fl 32801	·		
÷		City/State and Zip Code			
		gene@asbestos.com		As 2	
	E-mail address; (	to be used for future annual report notificati	on)		
For further information cor	ncerning this matter, please of	call:		2009 DEC -I	7
	ond Apelado	at (407) 965-575		η: ΤΙ: <b>+</b>	E STATE OF THE STA
Name of I	Person	Area Code & Daytime Te	lephone Number	PH	
			T X	H 2:2	*
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)	Certified (	of Status &	osed)

#### 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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2009

RAYMOND APELADO 20 NORTH ORANGE AVENUE, STE 1450 ORLANDO, FL 32801

SUBJECT: ASBESTOS & MESOTHELIOMA AWARENESS GROUP, LLC

Ref. Number: L07000121744

We have received your document for ASBESTOS & MESOTHELIOMA AWARENESS GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of all imited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 509A00037285

7 may

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# ASBESTOS & MESOTHELIOMA AWARENESS GROUP, 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 \_\_\_\_\_ December 6, 2007 and assigned L07000121744 Florida document number \_\_\_ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: AMAG, LLC 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) 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 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

<u>Title</u>	Name	Address	<b>Type of Action</b>
<u>.</u>			Add
			Remove
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			Remove
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<del></del>			Remove
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D. If amen	ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessar	<del></del> y.)
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  Dated	Signature of a mem	ber or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00