L07000127123

(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



100212288601

.10/17/11--01027--015 **25.00





J. BRYAN

OCT 28 2011

EXAMINER

COVER LETTER

	ration Sect on of Corpo						
SUBJECT:		TORTUGA HO	DLISTIC ISLAND, LLC				
			ited Liability Company	,	•		
The enclosed Ar	ticles of A	mendment and fee(s) are sul	bmitted for filing.				
Please return all	correspone	dence concerning this matter	r to the following:				
		_					
	Name of Person						
	Firm/Company						
	- <u> </u>						
		Cl	JTLER BAY, FL 33157	······································	- 22 7		
		rav	City/State and Zip Code ymestime16@aol.com		27 M S		
		E-mail address: (to be used for future annual report no	tification)	E 8 6		
For further infor	mation cor	ncerning this matter, please of	call:		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
		e Montpeirous	at (305)	254 0650			
	Name of F	Person	Area Code & Dayti	ime Telephone Numb	er		
Enclosed is a che	eck for the	following amount:					
\$25.00 Filing	g Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certifie	iling Fee, eate of Status & ed Copy onal copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Center Circle				



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2011

FABIENNE MONTPEIROUS TORTUGA HOLISTIC ISLAND, LLC 8395 SW 186 ST CUTLER BAY, FL 33157

SUBJECT: TORTUGA, HOLISTIC ISLAND, LLC

Ref. Number: L07000127123



We have received your document for TORTUGA, HOLISTIC ISLAND, 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):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 211A00023830

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TORTUGA HOLISTIC ISLAND, 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 Compa	any were filed on	12/26/2007	and assigned		
Florida document numberL07000127123					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited l	iability company here	:			
The new name must be distinguishable and end with the words "L".L.C."	imited Liability Compan	y," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS	2				
	 				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		ır records, <u>enter t</u>	he name of the new		
Name of New Registered Agent:					
New Registered Office Address:	Frate	er Florida street addi	4000		
	City	, Florida	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>	Address	Type of Action
MGRM	Reginald Montpeirous	8395 SW 186 St Cutler Bay, FL 33157	Regove
<u>MGRM</u>	Bernard Montpeirous	8395 SW 186 St Cutler Bay, FL 33157	Add Progrove
			Add Remove
			Add Remove
	,		Add Remove
			Add Remove
D. If amendi	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
			_
			_ _
Dated	10/11/2011		
-	Fab	r or authorized representative of a member ienne Montpeirous or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00