

# L07000127696

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2008 NOV - 6 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
NOV 10 2008  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** EDT OPERATIONS, 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:

Thomas J. Mooney  
(Name of Person)

EDT OPERATIONS, LLC  
(Firm/Company)

14833 NE 20th Ave  
(Address)

North Miami FL 33181  
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas J. Mooney at (954) 515-7354  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

FILED  
2003 NOV -6 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EDT OPERATIONS, 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 28, 2007 and assigned Florida document number L07000127696.

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)

EDT OPERATIONS, LLC  
14933 NE 20th Ave  
North Miami FL 33181

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

EDT OPERATIONS, LLC  
14933 NE 20th Ave  
North Miami FL 33181

**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:

Thomas J. Mooney

New Registered Office Address:

10301 Lone Star Place Danie FL 33528  
(Enter Florida street address)

Danie, Florida 33328  
(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>
<u>MGRM</u>	<u>DAN OWSLEY</u>	<u>28 CORTEZ WAY</u> <u>DAVIE FL 33326</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>EUGENIO ESCANABINO</u>	<u>140 N ROYAL POICIANA BLVD</u> <u>MIAMI SPRINGS FL 33166</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>MAIREL TUCCIANONE</u>	<u>8053 BUTTERNUT CIR</u> <u>TAMPA FL 33321</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>MICHAEL MOONEY</u>	<u>1160 N FEDERAL HWY #818</u> <u>FORT LAUDERDALE FL 33304</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>JOHN HUTCHISON</u>	<u>1500 NW 108TH AVENUE</u> <u>APT 224</u> <u>PLANTATION FL 33322</u>	<input checked="" 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.)

Dated

November 3rd, 2008

Signature of a member or authorized representative of a member

Thomas Mooney

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA