

05/04/2010 10:35 FAX

Division of Corporations

L07000128183

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : WARD, DAMON & POSNER, P.A.  
Account Number : 072262000447  
Phone : (561) 842-3000  
Fax Number : (561) 842-3626

**\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

LP/LLP AMENDMENT/RESTATEMENT/CORRECTION  
XL 411, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$52.50

RECEIVED  
10 MAY -4 AM 12:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EXAMINER

S. HAWKES

S. HAWKES

Electronic Filing Menu

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EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** XL 411, 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:

Stanley Fulton

Name of Person

XL 411, LLC

Firm/Company

4131 Boca Pointe Drive

Address

Sarasota, FL 34238

City/State and Zip Code

pward@warddamon.com

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

For further information concerning this matter, please call:

Philip H. Ward

Name of Person

at ( 561 )

842-3000

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**

\_\_\_\_\_  
(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 12/28/2007  
Florida document number L07000128183

FILED  
10 MAY 4 AM 8:47  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

XL411, 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

\_\_\_\_\_  
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>	<u>Address</u>	<u>Type of Action</u>
			<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
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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STATE OF FLORIDA  
CLERK OF SUPERIOR COURT  
JAILHOUSE

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated May 4, 2010

*Stanley Fulton*  
Signature of a member or authorized representative of a member

Stanley Fulton

Typed or printed name of signer