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SEGRETARY OF STATE
ALLAHASSEE, FLORIDA

D. BRUCE

APR 11 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Volcano Energy Group Limited Liability Company)  (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:
Luis NAX Rodii Guer (Name of Person)
(Firm/Company)
8415 SW 107 Ave # 306W (Address)
ALS OR
High: F1.33173         APR           (City/State and Zip Code)         APR
(City/State and Zip Code)
For further information concerning this matter, please call:
Luis Hat Rodrigues at (305) 776-8968 33 3 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Solution}\$\$\ \text{Solution}\$\$\ \text{Certificate of Status}\$\$ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$
MAILING ADDRESS: Registration Section STREET/COURIER ADDRESS: Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

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 Li (A F)	ability Company as it flow appears of orida Limited Liability Company)	n our records.	<del></del>	
The Articles of Organization for this Limited Liab	ility Company were filed on	NAM 11, 2	عم <mark>ی</mark> and assigne	ed
Florida document number <u>L0800004</u>	<u> 364</u> .	• •		
This amendment is submitted to amend the follow	ing:		08 APF	
A. If amending name, enter the new name of th	e limited liability company here:		ASS I	SECULIA NATIONAL
				याम्यः .
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company,"	' the designation '	FIGURIO, DORIO,	viation
registered agent and/or the new registered offic  Name of New Registered Agent:	e address here:			<del>.</del>
New Registered Office Address:				
New Registered Office Address.	(Enter	Florida street a	ddress)	
		Til a mid a	_	
-	(City)	, Florida <u>&gt;</u>	(Zip Code)	
·				
New Registered Agent's Signature, if changing Reg	istered Agent:			
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop accept the obligations of my position as registed being filed to merely reflect a change in the reg	per and complete performance of n red agent as provided for in Chapt	ny duties, and I ter 608, F.S. Or	am familiar wit , if this documer	h and

(If Changing Registered Agent, Signature of New Registered Agent)

company has been notified in writing of this change.

If amending the Managers or Managers 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 **Title** Address Type of Action Name | MGR. 8900 SW 187 AVE Remove Add Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated\_\_ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00