## L08000005037

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SECRETARY OF STATE

C. LEWIS

MAR - 7 2013

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations w. LIMA +ASSOCIATES, 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: Barbara A. Lima
Name of Person Lima + Asso ciates, LLC
Firm/Company 3938 Moreno Dr Address Palm Harbor FL 341685
City/State and Zip Code blima 98 @ amail. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727) 385 -0390

Area Code & Daytime Telephone Number Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

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(additional copy is enclosed)

**MAILING ADDRESS:** 

□\$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

FILED SECRETARY OF JIMES OLVISION OF CORTONALISE

2013 MAR - 6 AM O. 1 C

	•		- '	WW O HU O: 40	
Lima + A	ssociates,	LLC			
( <u>Name of the Limited L</u> (A F	lability Company as it n	ow appears o	on our records.)		
	•				
The Articles of Organization for this Limited Liab	oility Company were fil	ed on	1/15/2008	and assigned	
Florida document number L08000005	037				
This amendment is submitted to amend the follow	ing:				
A Year wall and a second and the sec	- 1114 - 3 14 - 1-1124	<b></b>			
A. If amending name, enter the new name of t	ne iimited habiiny con	<u>apany nere</u> :			
79	A	71:		TION - Ab - Ab - Add	
The new name must be distinguishable and end with "L.L.C."	me words "Limited Liabi	inty Company	, the designation	LLC for the aboreviation	
T and the state of	.1				
Enter new principal offices address, if applicat					
(Principal office address MUST BE A STREET	ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE Be	<u>0x)</u>				
B. If amending the registered agent and/or registered agent and/or the new registered offi		iress on our	r records, <u>enter</u>	the name of the new	
registered agent and/or the new registered only	te auditess nere.				
Name of Nam Basistand Assets	Ray	chara	A Lic	na	
Name of New Registered Agent:					
New Registered Office Address:	Barbara A Lima 3938 Moreno Dr  Enter Florida street address				
	Palm Harl	ber	, Florida	34685	
	City			Zip Code	
Now Registered Agent's Signature if changing Re	mistored Ament:				

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. Butara A Sima

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:

| SECRETARY OF STARY OF STAR

MGR = Manager MGRM = Managing Member		2019 HAD -	
<u>Title</u>	<u>Name</u>	2013 MAR - 6 AM 8: 46 Address Ty	pe of Action
MGRM	Timothy O. Lima	3938 Moreno Dr	Add
		Palm Harbor, FL 34685	Remove
MGRM	Barbara ALima	3938 Moreno Dr Palm Harbor, FL 34685	Add
		Palm Harbor, FL 34685	Remove
			Add
			Remove
			Add Remove
			Add
			Remove
			Add
			Remove

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if ne	cessary.)	ł 7,
		GECRETARY  DIVISION OF C	CELORISTS.
-		2813 MAR -6	
		<del></del>	
Dated_	February 28, 2013		
	Signature of a member or authorized representative of a member		
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00