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S. HAWKES

MAY 2 9 2009

EXAMINER

## **COVER LETTER**

Division of Co	orporations					
SUBJECT:	Outa	a World LLC				
Name of Limited Liability Company						
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
		·				
		James V.W. Picanza				
		Name of Person				
	Outa World LLC					
Firm/Company						
	13212 Boyette Rd.					
	Address					
	Riverview, FL 33569					
	City/State and Zip Code					
	jpicanza@gmail.com  E-mail address: (to be used for future annual report notification)					
F 6. 41 i 6						
ror further information (	concerning this matter, please of	au:				
Jame	es V.W. Picanza	at (	08-1464			
Name of Person Area Code & Daytime Telephone Number						
Enclosed is a check for t	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

### **MAILING ADDRESS:**

TO:

**Registration Section** 

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

Outa Wo	orld LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now app Liability Company	ears on our record	is.)
The Articles of Organization for this Limited Liability Company	were filed on _	January 24,	2008 क्री assignad
Florida document number L08000008924			
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	ility company k	iere.	29 1
<u> </u>			72
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Con	npany," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	Outa World LLC		
(Principal office address MUST BE A STREET ADDRESS)	13212 Boy	ette Rd.	
	Riverview, FL 33569		
Enter new mailing address, if applicable:	Outa World	LLC	
(Mailing address MAY BE A POST OFFICE BOX)	13212 Boyette Rd.		
	Riverview,	FL 33569	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ı our records, <u>e</u>	nter the name of the new
Name of New Registered Agent:			
New Registered Office Address:	i	Enter Florida stre	ret address
	, Florida		
	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 **Title** <u>Name</u> **Address Type of Action** ☐ Add □ Remove ☐ Add ☐ Remove ☐ Add Remove ☐ Add, Remove ∐A'dd: Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) May 27 2009 Dated \_\_\_ Signature of a member or authorized representative of a member James V.W. Picahza Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00