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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

OCT 2 9 2009

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Principle Capital Management, 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:
Rodney McClain Name of Person
Principle Capital Management, LLC.
2212 NW 129th Ave
Pembroke Pines, FL 33028 City/State and Zip Code
mclain & principle capital partners. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rodney McClain at (954) 554-8765 Name of Person at (954) 554-8765 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{\$30.00 Filing Fee & Certificate of Status} \$\subseteq \text{\$\subseteq \since \text{\$\since \text{\$\since \text{\$\since \text{\$\since \text{\$\since \text{\$\since \since \text{\$\since \since \text{\$\since \text{\$\since \text{\$\since \text{\$\since \t

### 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

Principle Capital	Manao	lement, L	.LC		
(Name of the Limited Lie (A Flo	<b>ability Compa</b> torida Limited L	y as it now appea iability Company)	rs on our records.)		
The Articles of Organization for this Limited Liabi		were filed on	1/31/2008	and assi	igned
Florida document numberL080000115(	<u>)a</u> .				
This amendment is submitted to amend the followi	ng:				
A. If amending name, enter the new name of th	e limited liabi	lity company her	<u>·e</u> :		
-			·		
The new name must be distinguishable and end with the "L.L.C."	ie words "Limit	ed Liability Compa	any," the designation "LI	_C" or the al	bbreviatior
Enter new principal offices address, if applicabl	e:				<del></del>
(Principal office address MUST BE A STREET A	(DDRESS)		······································		<u> </u>
					ÖÇ.
				<b>~</b>	OF A
Enter new mailing address, if applicable:				œ	87K
(Mailing address MAY BE A POST OFFICE BO	<i>X</i> )			=	<del>200</del>
	_			estelli ja 1	RAA
			· · · · · · · · · · · · · · · · · · ·	<b>60</b>	
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, enter th	e name of	f Me new
		· 1 .			
Name of New Registered Agent:	Danie	Friebis			
New Registered Office Address:	<u> 3890 7</u>	orthe Cree	ek Drive 50 ter Florida street addre	urte B	<del></del>
-	Port O	range.	, Florida <u> </u>	2127	
		CityV		Zip Code	
Naw Dagistarad Agant's Signatura, if changing Ragi	ctored Agent.				

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

Page 1 of 2

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 Name Address** Type of Action ☐ Add Remove MGR Remove □ Add Remove Add Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ture of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00