# L08000014491

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SECRLIARY OF STATE
AND AHASSEE, F. SAID

S. HAWKES

APR 3 0 2010

EXAMINER

## **COVER LETTER**

Division of Cor	porations		
SUBJECT:	D) - VER	SPTILE TOUR	NG, LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	KEI	DI-VERSATILE- Firm/Company  9511 NW 11 ST Address  PLANTATION, FE City/State and Zip Code (MARCUS CMA	335ZZ
For further information co	oncerning this matter, please ca	o de useu for fature annual report nouncati	ion)
KEVIN Name of	SYLVESTER	at 954). 554-5 Area Code & Dayame To	5486 Elephone Number
Enclosed is a check for th	e 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)
МАПЛ	NG ADDRESS:	STREET/COURIER	ADDRESS:

TO:

**Registration Section** 

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

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 2/8/2008	and assigned
Florida document number	• • • • • • • • • • • • • • • • • • • •	EST R
L08000014491	·	THE BOTH
This amendment is submitted to amend the following:		SET O
A. If amending name, enter the new name of the limited liab    D   - V   E   S   T   C   M   U   S   E    The new name must be distinguishable and end with the words "Limit" L.L.C."		"LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
9511 NW 11 ST		٠
PLANTATION FZ 33322 Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
9511 NW 11 8T		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>enter</u> <u>e</u> :	the name of the new
Name of New Registered Agent:		•
New Registered Office Address:	Enter Florida street ad	ddress
	_, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agri	ee to act in this canacity. I further a	saree to comply with
the provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office company has been notified in writing of this change.	lete performance of my duties, and I provided for in Chapter 608, F.S. O	l am familiar with and r, if this document is

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 Name Address Type of Action

Add Remove

\_\_ Remove

∏Add ☐Remove

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

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