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T. HAMPTON

APR 1 5 2008

EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: / COV CONTROL (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:
Mr. Miguel Allan (Name of Person)
Joung world LLC (Firm/Company)
18726 NE 18 AVE # 118
Miami, FL 33179  (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (766) 210 - 9984 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee \$ \$55.00 Filing Fee \$ \$60.00 Filing Fee, Certificate of Status \$ Certified Copy (additional copy is enclosed)

### 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**

∙ापनमञ्जू<del>रहू</del> काराचारा

Nomo de the Limit		1070 CC		<del> </del>
(Name of the Limit	(A Florida L	Company as it now appointed Liability Company	in our records.	J
The Articles of Organization for this Limited	Liability Co	ompany were filed on _	February "	1, ≻06 € and assigned
Florida document number		<u> </u>	•	
Sin-				
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limi	ted liability company h	<u>iere</u> :	
Vouse & Com	161	1 1 C		
The new name must be distinguishable and end	with the word	ds "Limited Liability Con	pany," the designation	
"L.L.C."		<b>,</b>	1, ,	
B. If amending the registered agent an	d/or registe	ered office address or	ı our records, <u>ent</u>	er the name of the new
registered agent and/or the new registered	office addr	ress here:		
Name of New Registered Agent:				
N. B. 1. 100 A.11	; •			
New Registered Office Address:			Enter Florida stree	t address)
	2	'		
	• <u></u>	· · · · · · · · · · · · · · · · · · ·	, Florida	(Zip Code)
		(City)		(Zip Coae)
	in cape.			
New Registered Agent's Signature, if changing	z Registéred	l Agent:		
	4.1 4.16.1			
I hereby accept the appointment as registe	red agent a	and agree to act in this	capacity. I further	agree to comply with
the provisions of all statutes relative to the	proper and	d complete performand	e of my duties, and	d I am familiar with and
accept the obligations of my position as re				
being filed to merely reflect a change in th	e registered	a ojjice address, I here	by confirm that the	e limited liability

Page 1 of 2

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:

MGRM = N	Managing Member	12314	#	
<u>Title</u>	<u>Name</u>	\$	Address	Type of Action
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				Add Remove
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				Add Remove
		Page 18	eg .	Add Remove
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D. If amend	ling any other informat	ion, enter change(	(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF CORDIVISION OF CORDIVIS
_	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	36		PH 3: 42
Dated	7/72/500	serial .		
·	Sign	ignal	r authorized representative of a member  printed name of signee	*************

Page 2 of 2

Filing Fee: \$25.00