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EXAMINER



400164293484

02/02/10--01009--017 \*\*25.00

\$40.5

DIVISION OF CORPORATION

## **COVER LETTER**

TO: Registration Section Division, of Corporations
SUBJECT: PACE DE LEON 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:
MIGHELLE RUCOH Name of Person
BRAOCO, INC.
3642 PEACHTREE ROAD Address
City/State and Zip Code
For further information concerning this matter, please call:
Miatrue Rund at HOH): 233-1476  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  \$\ (\text{additional copy is enclosed}) \]  \$\ (\text{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

PONCE DE LEON	uc		
( <u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability of Florida document number LOSOCO LOS	Company were filed on <u>02</u> 38	1-/13/2008	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	any," the designation "LLe	C" or the abbreviation
Enter new principal offices address, if applicable:		majori,	
(Principal office address MUST BE A STREET ADD	(RESS)		<b>10</b>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			FILED RETARY OF SIATOR OF COMPORATOR 20
B. If amending the registered agent and/or registered agent and/or the new registered office ade		our records, <u>enter the</u>	name of the nev
Name of New Registered Agent:			
New Registered Office Address:	Ei	nter Florida street addre	SS
		, Florida	
	City	, rioriua	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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Mentber being added or removed from our records:

MGR = Manager

MGRM = N	Aanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	FRANK B BROOSHAWITI	3642 PEACHTIGHE RD NE ATLANTA GA 30319	Add Remove
MERM	BRADCO, INC.	3042 PEACHTREE PONE ATLANTA CA 30319	Add Remove
MGR	PATRICK O'NEILL	3642 PEACHTREEZ RO NE ATLANTA GA 30819	Add Remove
			Add Remove
			□Add □Remove
			Add Remove
D. If amend	ding any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	_
			_ _
_		^	_
Dated	ANUARY 27, 2010	1/1/1///	
	FRANK B BRADS	r authorized representative of a member	

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Filing Fee: \$25.00