

LO8000016755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

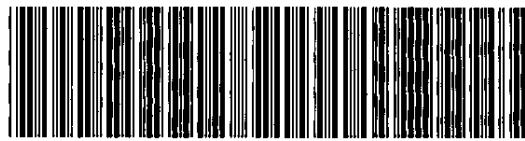
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OCT - 5 2010

EXAMINER

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10/04/10--01017--003 **25.00

2010 OCT - 4 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Feeiser Enterprises 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:

Bernard Feeiser
Name of Person

Feeiser Enterprises LLC
Firm/Company

1492 Mair Circle
Address

Clermont, FL 34711
City/State and Zip Code

bernard.Feiser@knights.ucf.edu
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bernard Feeiser at (352) 396-5026
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

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

2010 OCT -4 PM 3:39

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Feeser Enterprises LLC

(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 2/14/08 and assigned
Florida document number L08000016755

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____
Enter Florida street 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 **Name** **Address** **Type of Action**

MG-RM Mark E Feeser 109 Summerhill Ct
Mirrored, FL 34715 Add Remove

Add
 Remove

_____ Add Remove

Add Remove ~~Cancel~~

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

□ Add
Remove
10 OCT 3 PH 3: 399
JEFFREY T. JAY OF STATE
FALLAHASSEE FLORIDA

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Signature of a member or authorized representative of a member

Bernard Feeser

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00