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EXAMINER

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09/11/08--01015--007 **25.00

SECNLIANT OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Right Tone 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:
Cocal Gables Fl 33134 (City/State and Zip Code)
For further information concerning this matter, please call:
Ocycymi Sierra at (786) 267 5398 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sum_{25.00}\$ \text{Filing Fee} \sum_{30.00}\$ \text{Filing Fee & Status} \sum_{55.00}\$ \text{Filing Fee & Settificate of Status & Certified Copy (additional copy is enclosed)} \sum_{60.00}\$ \text{Filing Fee, Certified Copy (additional copy is enclosed)}
MAILING ADDRESS: STREET/COURIER 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

any as it now appears on our records.) Liability Company)
y were filed on $3/3/200$ and assigned
y were fried on and assigned
bility company here: Warne of Company wa
nited Liability Company," the designation "LLC" or the abbreviation
office address on our records, enter the name of the new
_
(Enter Florida street address)
(Enter Florida street address) , Florida (City) (Zip Code)
<u> </u>

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 ' <u>Name</u> **Address** Type of Action 6060 Indian Creek ☐ Add 7 Remove ☐ Add Remove ∏Add Remove Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Dayami Sierra
Typed of printed name of signee

Page 2 of 2

Filing Fee: \$25.00