L080000013924

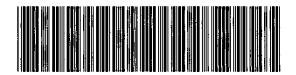
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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L. SELLERS

APR - 1 2009

EXAMINER

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COVER LETTER

TO: Registration Sect Division of Corpo			•
SUBJECT:	orida Hon	ne Buyer	
	(Name of Lin	nited Liability Company)	
The enclosed Articles of Ar	mendment and fee(s) are sul	omitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Timothy	Biswum (Name of Person)	
		(Name of Person)	
		(Firm/Company)	
	9871 El	• •	
		(Address)	
	Bonita Sp	(Address) (Address) (City/State and Zip Code)	
		(City/State and Zip Code)	
For further information con	cerning this matter, please of		
Timothy Bis	WMMPerson)	at (<u>239)</u> 273 -68 (Area Code & Daytime T	20 elephone 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



March 16, 2009

TIMOTHY BISWURM 9871 EL GRECO CIR. BONITA SPRINGS, FL 34135

SUBJECT: TIMOTHY BISWURM CONSULTING, LLC

Ref. Number: L08000023921

We have received your document for TIMOTHY BISWURM CONSULTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective July 1, 2007, the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 409A00008877

Leslie Sellers Regulatory Specialist II

Division of Companytions D.O. DOV 6207 Wellshames Elevide 20014

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Timothy Biswur	m Consulting LLC.					
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)					
The Articles of Organization for this Limited Liability Company Florida document number	were filed on \$100 A.m. 03/06/08 and assigned					
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabi						
The new name must be distinguishable and end with the words "Limit "L.L.C."	LLC. ed Liability Company," the designation "LLC" or the abbreviation					
Enter new principal offices address, if applicable:	Thiothy Biswurm 1585 Clerment Or # 201					
(Principal office address MUST BE A STREET ADDRESS)	1383 Cleranont ()/ # 20) Naples, FC 34109					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Timothy Biswurn 9871 El Greco Cir Bonita Springs, FL 34135					
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:	O9 HA SECRE					
New Registered Office Address: Banita New Registered Agent's Signature, if changing Registered Agent:	Grew Cir Springs (Enter Florida street address) Springs , Florida (City) (City) Springs , Florida (City) Springs , Florida (City)					

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 Member being added or removed from our records:

GR = Ma GRM = 1	anager Managing Member		
<u>le</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
<u> </u>			_ _
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c	ar		
i ainei	uing any other miormation, en	er change(s) here: (Attach additional shee	is, ij necessary.)
·			TAS C
			9 MAR 31 SECRITARINA ALLABASSE
_			R 31
ed/	March 10th	, 2009.	
	Junot	My Biswilm	AH 8: 45
	Signature of	almember or authorized representative of a men	mber
		Typed or printed name of signee	٠. ٠. ٠. ٠. ٠. ٠. ٠. ٠. ٠. ٠. ٠. ٠. ٠. ٠

Page 2 of 2

Filing Fee: \$25.00