

# Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6383

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

### FRANKIE FIT-IT, LLC

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MAR 24 2008

EXAMINER

3/21/2008

#### **COVER LETTER**

	istration Section sion of Corporations	
SUBJECT:	Frankie Fit-It, LLC	
	(Name of Limited Liability Company)	
The enclose	Articles of Amendment and fee(s) are submitted for filing.	
Please retur	all correspondence concerning this matter to the following:	
	Francyne Carrillo	
	(Namo of Person)	
	Legalzoom.com, Inc.	
	(Firm/Company)	
	7083 Hollywood Blvd., Suite 180	
	(Address)	
	Los Angeles, CA 90028	
•	(City/State and Zip Code)	
For further i	formation concerning this matter, please call:	
<u>Francyne</u>	Carrillo at (323 ) 962-8600	
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is	check for the following amount:	
<b>√</b> \$25.00 F	ing Fee \$\ \$30.00 Filing Fee & \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\	sed)

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

Frankle Fit-It, LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF SECRETARY OF STATE DIVISION OF CORFORATIONS

(A Florida Limited Liability Company)	30	SNOL
The Articles of Organization for this Limited Liability Company were filed on 03/10/2008	_ and assigned	υ,
Floride document number <u>L08000024868</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
Frankje Fix-It, LLC		
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" "L.L.C."	or the abbreviat	ion
B. If smending the registered agent and/or registered office address on our records, <u>enter the</u> registered agent and/or the new registered office address here:	name of the n	<u>.977</u>
Name of New Registered Agent:		

#### New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

(Enter Florida street address)

, Florida \_

(Zip Code)

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Manager Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	<u> Nате</u>	Address	Type of	Acti	<u>20</u>
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D. Ifamei	nding any other information, enter change(s	) here: (Attach additional sheets, if necessary.)	<del>-</del>	08 MAR 21	SECRET
· <u>-</u>			- -	=	<b>₩</b>
Dated		·	_	8: 30	THOMS
	Francis John Rieszer, Member	r authorized representative of a member		,	

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Filing Fee: \$25.00