

L08000025671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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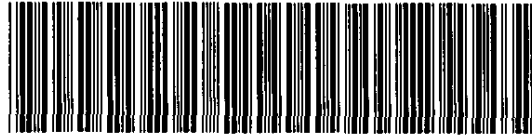
(Business Entity Name)

(Document Number)

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DEPT. OF STATE  
DIVISION OF INFORMATION  
TALLAHASSEE, FLORIDA

FILED

08 JUL 17 AM 10:45

DEPT. OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

JUL 18 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 651869 7313146

AUTHORIZATION :

COST LIMIT : \$ 25,000

FILED  
08 JUL 17 AM 10:45  
TALLAHASSEE, FLORIDA

ORDER DATE : July 17, 2008

ORDER TIME : 2:46 PM

ORDER NO. : 651869-005

CUSTOMER NO: 7313146

DOMESTIC AMENDMENT FILING

NAME: ABACOA HOLDINGS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ABACOA HOLDINGS, 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 03/11/2008 and assigned  
Florida document number L08000025671.

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: 11467 RIVERWOOD PLACE  
(Principal office address **MUST BE A STREET ADDRESS**) NORTH PALM BEACH, FL 33408

Enter new mailing address, if applicable: 11467 RIVERWOOD PLACE  
(Mailing address **MAY BE A POST OFFICE BOX**) NORTH PALM BEACH, FL 33408

**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: BRUCE CRAWFORD  
New Registered Office Address: 11467 RIVERWOOD PLACE  
(Enter Florida street address)  
NORTH PALM BEACH, Florida 33408  
(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.*

/s/ BRUCE CRAWFORD  
(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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	BRUCE CRAWFORD	11467 RIVERWOOD PLACE NORTH PALM BEACH, FL 33408	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	RAJENDRA BANSAL	500 UNIVERSITY BLVD # 107 JUPITER, FL 33458	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 7-17, 08

/s/ BRUCE CRAWFORD

Signature of a member or authorized representative of a member

BRUCE CRAWFORD

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00