

LD8000026333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

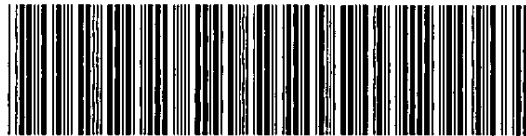
Special Instructions to Filing Officer:

L. SELLERS

JUN 19 2008

EXAMINER

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06/03/08--01003--022 **25.00

2008 JUN 17 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EPUN 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:

ALVARO JARAMILLO
(Name of Person)

EPUN LLC
(Firm/Company)

914 S POMPANO PARKWAY
(Address)

POMPANO BEACH FL 33069
(City/State and Zip Code)

For further information concerning this matter, please call:

ALVARO JARAMILLO at (561) 706 8745
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2008

ALVARO JARAMILLO
914 S. POMPANO PARKWAY
POMPANO BEACH, FL 33069

SUBJECT: EPUN, LLC
Ref. Number: L08000026333

We have received your document for EPUN, 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):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR."

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.

Leslie Sellers
Regulatory Specialist II

Letter Number: 508A00034827

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2008 JUN 17 PM 1:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EPUN 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 MARCH 12-08 and assigned
Florida document number LD8-26333.

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: MGRM - ALVARO JARAMILLO

New Registered Office Address:

914 S POMPANO PKWY

(Enter Florida street address)

POMPANO BEACH

(City)

Florida

33069

(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.

Alvaro Jaramillo
(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
MEM	ADD: SEGOVIA JORGE	CARRERA / ESTE No 78.44 ap 801	<input checked="" type="checkbox"/> Add
	Remove: SEGOVIA JOSE	CARRETERA / ESTE No 78.44 ap 801	<input checked="" type="checkbox"/> Remove
MEM	ADD: Reyes ALVARADO Yesid		<input type="checkbox"/> Add
	Remove: ALVARADO Reyes Yesid		<input type="checkbox"/> Remove
MEM	JARAMILLO SANDRA	CARRERA / ESTE No 78.44 ap 801	<input checked="" type="checkbox"/> Add
		CARRETERA / ESTE No 78.44 ap 801	<input checked="" type="checkbox"/> Remove
MEM	JARAMILLO GONZALO	CARRERA 21 No 101-59 ap. 204	<input checked="" type="checkbox"/> Add
		CARRETERA 21 No 101-59 ap. 204	<input checked="" 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.)

1. As you can see, Above, The Lawyer made mistakes printing names and addresses on the filing.
2. Members are same people.

Dated

May 29

2008

Alvaro Jaramillo

Signature of a member or authorized representative of a member

ALVARO JARAMILLO

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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