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SECRETARY OF STATE
DIVISION OF CORPORATION
08 MAR 17 PM 3:45

G. MCLEOD
MAR 19 2008
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Glisten 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:

JoAnn Durand
(Name of Person)

Glisten LLC
(Firm/Company)

8804 Briarwood Meadow Ln.
(Address)

Boynton Beach 7133473
(City/State and Zip Code)

For further information concerning this matter, please call:

JoAnn Durand at 561 244 5019 (561 767 0371 cell)
(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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

08 MAR 17 PM 3:45

Glisten 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 3.13.08 and assigned
Florida document number 26-2169354.

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."

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:

JoAnn Durand

New Registered Office Address:

8804 Briarwood Meadow Ln

(Enter Florida street address)

Boynton Beach

(City)

Florida

33473

(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.


(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	JoAnn Durand	8804 Briarwood Meadow Ln. Boynton Beach 71	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	JoAnn Durand	33473	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jamie Durand	8804 Briarwood Meadow Ln Boynton Beach 71	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
		33473	<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.)

* I JoAnn Durand am familiar with *
and accept the obligation of this position
I am accepting appointment.
JoAnn Durand / *[Signature]* March 15, 2008

Dated March 15 2008

[Signature]
JoAnn Durand
Signature of a member or authorized representative of a member
[Signature]
Jamie Durand
Typed or printed name of signee