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SECRETARY OF STATE SEVENTIONS OF CORPORATIONS

J. BRYAN

APR 1 0 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ABERDEEN IMPROVEMENTS 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:	
C, KUNISH (Name of Person)	- N a
ABERDEEN IMPROVEMENTS LLC & Firm/Company) P.O. BOX 93/16	40.53A R
P. O. BOX 93/16 (Address) LAKELAND FL 33804 (City/State and Zip Code)	OF CORP
LAKELAND, FL 33804 (City/State and Zip Code)	STATIONS
For further information concerning this matter, please call:	
C. KUNISH at (863 686 0136 (Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$Certificate of Status \$55.00 Filing Fee \$Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	d)
MAILING ADDRESS. STREET/COUDIED ADDRESS.	

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

Name of the Limited	Liability Company as it now appears on our records.). Florida Limited Liability Company)
The Articles of Organization for this Limited L	iability Company were filed on 3/17/08 and assigned
Florida document number 208 000	owing:
This amendment is submitted to amend the foll	owing:
A. If amending name, enter the new name o	f the limited liability company here:
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Company," the designation "LLC" or the abbreviation
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent:	or registered office address on our records, enter the name of the new
New Registered Office Address:	
	(Enter Florida street address)
No. 1 Same and a	(City) (Zip Code)
<u>New Registered Agent's Signature, if changing I</u>	Registered Agent:
I hereby accept the appointment as registere the provisions of all statutes relative to the p accept the obligations of my position as regi being filed to merely reflect a change in the i company has been notified in writing of this	d agent and agree to act in this capacity. I further agree to comply with roper and complete performance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S. Or, if this document is registered office address, I hereby confirm that the limited liability change.
	(If Changing Registered Agent, Signature of New Registered Agent)
A Company of the State of the S	Section 18

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> Type of Action SEAKAY SERVICES 825 VISTABULA ST LAKELAND, FL 33801 MGR SEAKAY SERVICES CORPORATION P.O. BOX 92733 LAKELAND, FL 33804 MGR Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) CORRECT MAILING ADDRESS OF ABERDEEN IMPROVEMENTS LLC TO SHOW: P.O. BOX 93116 LAKELAND, FL 33804-3116 Typed or printed name of signee

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Filing Fee: \$25.00