

05/21/2008 23:50

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USA TAX CORPORATION

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Florida Department of State
Division of Corporations
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Fax Number : (850) 617-6383

From:

Account Name : USA TAX CORPORATION
Account Number : I20060000112
Phone : (954) 788-1818
Fax Number : (954) 788-6765

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RADAR MULTISERVICES, LLC

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

08 MAY 22 AM 9:54

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T. HAMPTON

MAY 23 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RADAR MULTISERVICES, 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:

MARCO REIS
(Name of Person)

USA TAX CORPORATION
(Firm/Company)

591 E. SAMPLE ROAD
(Address)

POMPANO BEACH, FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

MARCO REIS at (9 5 4) 7 8 8 - 1 8 1 8
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
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Certificate of Status &
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(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**

RADAR MULTISERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
08 MAY 22 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/21/2008

and signed

Florida document number L08000029439

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:

New Registered Office Address:

(Enter Florida street address)

_____ Florida _____

(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.

(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>
MGR	JERONIMO LOPES DA SILVA	651 CYPRESS LAKES BLVD 19L POMPANO BEACH, FL 33064	<input checked="" 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
			<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.)

ARTICLE II - ADDRESS

PLEASE CORRECT THE ADDRESS TO:

6514 CYPRESS LAKES BLVD UNIT 19L, POMPANO BEACH, FL 33064

Dated May 22, 2008

Signature of a member or authorized representative of a member

LUCILEIA ALMEIDA

Typed or printed name of signer

08 MAY 22 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA