# L08000038301

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(Address)
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SECRETARY OF STATE
BIVISION OF CORPORATIONS
ON MIC - L. PH 2: 12

J. BRYAN

AUG - 5 2008

**EXAMINER** 

## **COVER LETTER**

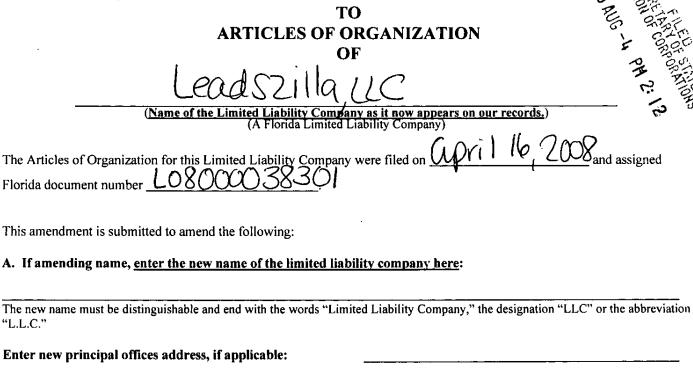
TO: Registration Sec Division of Corp	ction porations		
SUBJECT:	endszilla	ited Liability Company)	·
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	OB AUG -4
Please return all correspon	ndence concerning this matter	to the following:	le arti
	sue H	anna	
	Leads	(Name of Person)	2: 12
	Lell We	(Firm/Company)  IMOVE Rd Su	ite 221-B
	Winte	Park F. 3	2789
		(City/State and Zip Code)	
For further information co	oncerning this matter, please ca		o o o o
SUR Hay	f Person)	at (401) 862-16 (Area Code & Daytime T	elephone Number)
Enclosed is a check for the	e 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)
	No. BBBBB		ADDECC

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



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)

(City)

New Registered Agent's Signature, if changing Registered Agent:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 **Title Type of Action** Arsene Orelien Remove 🗂 Add Remove ☐ Remove ┌ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00