

L08000041782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

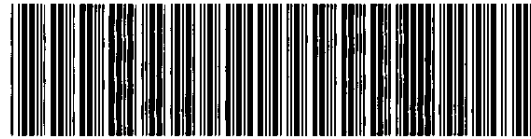
Special Instructions to Filing Officer:

G. MCLEOD

Office Use Only

JUN 03 2010

EXAMINER



000181461000

06/01/10--01007--008 **25.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUN - 1 AM 10:22

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PINT, 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:

LIVAN PAMPILLO

Name of Person

SMART ACCOUNTING SOLUTIONS INC

Firm/Company

8204 CRYSTAL CLEAR LN SUITE 1000

Address

ORLANDO, FL 32809

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LIVAN PAMPILLO

Name of Person

at (407)

816-9904

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
PINT, LLC
L08000041782**

FIRST: The Articles of Organization were filed on April 25, 2008.

SECOND: This amendment is submitted to amend the following:

ARTICLE II

The street address of the principal office and mailing address of the Limited Liability Company is:

**4524 CURRY FORD RD
SUITE # 277
ORLANDO, FL 32812**

Signed this 26th day of May 2010.

Signature:



Signature of a member or authorized representative of a member.

OR

(By a manager if adopted by managers)

JOSE J MORALES

Typed or printed name

MANAGER

Title

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUN - 1 AM 10: 22