108000042323

(Requestor's Name)				
· (Ad	dress)			
(Ad	ldress)			
,	,			
(C:	ndCtata MindDhana	- 40		
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(24	omoco zmaty rtan	,		
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to	Ciling Officer:			
Special Instructions to Filing Officer:				
		:		
		i		
		1		
]		

Office Use Only



700128518317

05/07/08--01021--001 **25.00

08 MAY -7 PM 1: 55

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON
MAY - 8 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AMERICAN NATIONWICLÉ RESOUTCES, 226 (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:
(Name of Person) AMERICAN NATION WICE RESULTED 126 (Firm/Company)
(Firm/Company)
1265 S. SEMORAN Blvd suite 1241 (Address)
Winter Park, Flakida 32792 (etty/State and Zip Code)
For further information concerning this matter, please call:
Claude Charles at (407-671-9494 (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 \$Certificate of Status \$Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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>	Name	Address	Type of Action		
<u>MG</u> R	Claude Charles	1273 Falconcrest Blue Apapha Florida 327/2	Add Remove		
MGK .	Raymoncle J- Chang	Apop KA Fl. 327/2	Add Remove		
			Add Remove		
D. If amendi	ng any other information, enter change((s) here: (Attach additional sheets, if necessary.)	O		
 Dated <u>5</u>	15/2008		SECRETARY OF STATE STATE SECRETARY OF STATE STAT		
-	CAC	authorized representative of a member Compared to the compare			

Page 2 of 2

Filing Fee: \$25.00