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## COVER EETTER

TO: Registration Section Division of Corporations		
SUBJECT: Sovereign Capital Management, 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:		
Daniel Maus Name of Person		
Sovereign Capital Management, clc		
805 E. Hillsborn Blvd Ste 101 Address		
Deerfield Beach, F1. 3344/ City/State and Zip Code		
E-mill address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Jocely Ne Martorano at (954) 695-7604  Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Status Status & Certified Copy (additional copy is enclosed)} \text{\$\ \text{Solonon} \text{Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\ \text{Certified Copy (additional copy is enclosed)}} \$\ \text{Certified Copy (additiona		
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.)  (A Florida Limited Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number. Los ooo 42 458	were filed on 4-17-2008 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	llity company here:	
The new name must be distinguishable and end with the words "Limit" L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	805 E. Hillsboro Blud, Stc/01 Deerfield Beach, Fl. 33441	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	805 E. Hillsboro Blud Stelon Deerfield Beach, Fl. 33441	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		
Name of New Registered Agent:	SECRETARIAN SECRET	
New Registered Office Address:	Enter Florida street address , Florida	
New Registered Agent's Signature, if changing Registered Agent:	City Code	

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> **Address Type of Action** Daniel Maus MOR ☐ Remove \_\_ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated December 19, 2011. Signature of a member or authorized representative of a member Jocelune Martorano
Typed or printed name of signee

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Filing Fee: \$25.00