L080000042466

_____
(Requestor's Name)

_____
(Address)

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(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
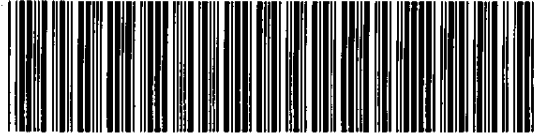(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT

JAN - 8 2008

EXAMINER

Office Use Only

COVER LETTER

SUBJECT: _____ **SAMATHA, 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:

PETER MINKA
_____
                        (Name of Person)

_____
                        (Firm/Company)

6984 NW 8 ST
_____
                        (Address)

Margate, FL 33063
_____
                  (City/State and Zip Code)

For further information concerning this matter, please call:

Peter Minka   at (954) 448-3664
_____   _____
    (Name of Person)   (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee ☐ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☑ $60.00 Filing Fee,
                       Certificate of Status   Certified Copy   Certificate of Status &
                                                (additional copy is enclosed)   Certified Copy
                                                                        (additional copy is enclosed)

FILED 2009 JAN -7 PM 4: 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SAMATHA, LLC
(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 were filed on 3/22/2006 and assigned

Florida document number L08000042466 .

This amendment is submitted to amend the following:

A. If amending name, <u>enter the new name of the limited liability company here</u>:

_____

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."

Enter new principal offices address, if applicable: 6984 NW 8 ST

(Principal office address MUST BE A STREET ADDRESS) Margate, FL 33063

Enter new mailing address, if applicable: 6984 NW 8 ST

(Mailing address MAY BE A POST OFFICE BOX) Margate, FL 33063

FILED 2009 JAN -7 PH 4: 05 SECRETARY OF STATE TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

Name of New Registered Agent: PETER MINKA

New Registered Office Address: 6984 NW 8 ST

(Enter Florida street address)

Margate , **Florida** 33063

(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, <u>Signature of New Registered Agent</u>)

Page 1 of 2

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:**
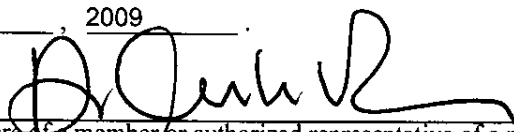
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MINKA, PETER	6984 NW 8 ST MARGATE, FL 33063	☑ Add ☐ Remove
MGRM	HOLUBEC, ERIK	2071 S OCEAN DR. SUITE 19 HALLANDALE BEACH, FL 33009	☐ Add ☑ Remove
MGRM	MIFTKA, IVAN	LIBOVIC 14 MSENO CZ 27735 CZECH REP.	☐ Add ☑ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated ___JANUARY 5___, ___2009___

_____
Signature of a member or authorized representative of a member

PETER MINKA, MGR of SAMATHA, LLC
_____
Typed or printed name of signee

Page 2 of 2

Filing Fee: $25.00