

U8 000046227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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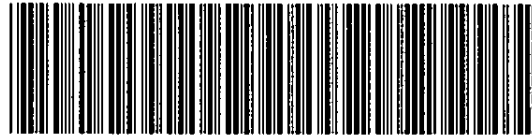
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE

JAN 28 2009

EXAMINER

LAW OFFICE

**RARICK & ASSOCIATES, P.A.**

**The Colonnade at Miami Lakes  
6500 Cowpen Road, Suite 204  
Miami Lakes, Florida 33014**

Phillip B. Rarick\*  
Ritu Airan Mauskar  
Tanya Garcia Vega

Telephone (305) 556-5209  
Facsimile (305) 362-9525  
E-Mail: TVega@Raricklaw.Com  
Web Site: RarickLaw.Com

\*Also admitted in Indiana & Virginia

Office Manager: Alexis Mayor

January 21, 2009

CERTIFIED MAIL

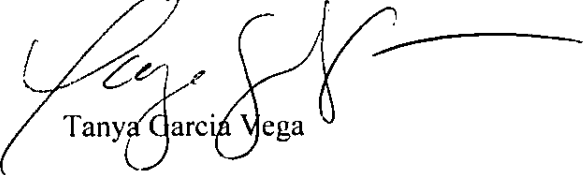
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: Articles of Amendment to Article of Organization-Name Change 99 Costa Brava, LLC

To Whom It May Concern:

Enclosed please find Articles of Amendment for the above referenced LLC. This firm represents 99 Costa Brava, LLC and its Managers Charlotte and Charles Floyd. We request that the name of the LLC be changed from 99 Costa Brava, LLC to 99 Costa Bravo, LLC. Also, enclosed please find a check in the amount of \$25.00 for filing of the Articles of Amendment. Should you have any questions or concerns please do not hesitate to contact our office.

Sincerely,

  
Tanya Garcia Vega

Encl.

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TALLAHASSEE, FL  
SECRETARY OF STATE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 99 COSTA BRAVA, 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:

Tanya Garcia Vega, Esq.

(Name of Person)

Barick & Associates, P.A.

(Firm/Company)

6500 Cowpen Rd - Suite 204

(Address)

Miami Lakes, FL 33014

(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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For further information concerning this matter, please call:

Tanya Garcia Vega at 305 556-5209

(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 &  
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**

99 Costa Brava, 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 5/08/2008 and assigned  
Florida document number LO8000046227

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

99 Costa Bravo, LLC

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:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**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)

Florida

(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, 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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated January 20, 2009.

Tanya Garcia Vega  
Signature of a member or authorized representative of a member  
Tanya Garcia Vega  
Typed or printed name of signer