# L080000046719

(Requestor's Name)
(Address)
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, (City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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390 NORTH ORANGE AVENUE SUITE 1400 ORLANDO, FLORIDA 32801 P.O. BOX 4961 (32802-4961) TELEPHONE: 407.839.4200 FACSIMILE: 407.425.8377 www.broadandcassel.com

JENNIFER 1., HINES DIRECT LINE: 407-481-5234 DIRECT FACSIMILE: 407-246-6792 EMAIL: jhines@broadandcassel.com

June 24, 2008

#### VIA CERTIFIED MAIL/RETURN RECEIPT REQUESTED

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

Re: Lajet-Suryc, LLC

Dear Sir or Madam:

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Enclosed herewith, please find an original and one (1) copy of an Articles of Correction for the above-referenced matter, along with our check in the amount of \$25.00. Please file the original and return the stamped filed copy to our office using the enclosed, self addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office. I thank you for your prompt and courteous attention to this matter.

Sincerely,

**BROAD AND CASSEL** 

/jlh



# FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2008

BROAD AND CASSEL ATTN: JENNIFER L. HINES P.O. BOX 4961 ORLANDO, FL 32802-4961

SUBJECT: LAJET-SURYC, LLC Ref. Number: L08000046719

We have received your document for LAJET-SURYC, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 208A00039

FILED

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390 NORTH ORANGE AVENUE SUITE 1400 ORLANDO, FLORIDA 32801 P.O. BOX 4961 (32802-4961) TELEPHONE: 407.839.4200 FACSIMILE: 407.425.8377 www.broadandcassel.com

JENNIFER L. HINES DIRECT LINE: 407-481-5234 DIRECT FACSIMILE: 407-246-6792 EMAIL: jhines@broadandcassel.com

July 3, 2008

#### VIA CERTIFIED MAIL/RETURN RECEIPT REQUESTED

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32301

Re:

Lajet-Suryc, LLC

Dear Sir or Madam:

Enclosed herewith, please find the following documents for filing with your office:

- 1. Your letter dated June 30, 2008 (letter number 208A00039024);
- 2. Cover Letter:
- 3. Articles of Amendment to Articles of Organization; and
- 4. Articles of Correction, which had been previously submitted.

Please apply the \$25.00 filing fee that was previously provided to your office with the Articles of Correction. Please file the original and return the stamped filed copy to our office using the enclosed, self addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office. I thank you for your prompt and courteous attention to this matter.

Sincerely,

**BROAD AND CASSEL** 

Jennifer L. Mines, Paralegal

/jlh

## **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

SUBJECT: Lajet-S	uryc, LLC			0
		nited Liability Company)	<del></del>	_
· The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Kallis D. aleks			
	Keith Durkin	(Name of Person)		
		(Addition Forsoff)		
	Broad & Cassel			
		(Firm/Company)		
	390 North Orange Avenu	ue, Suite 1400	200 <b>4</b> SECI	
		(Address)	AHAS	77
	Orlando, Florida 32801		ARY ARA	
		(City/State and Zip Code)	TES U	111
For further information of	concerning this matter, please c	all:	4: 18 STATE ORIDA	
Keith Durkin		at ( 407 ) 839-4289		
(Name	of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for t	he 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 Sta Certified Copy (additional copy	
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lajet-Suryc, LLC		
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records d Liability Company)	r)
The Articles of Organization for this Limited Liability Compar	ny were filed on May 9, 2008	and assigned
Florida document number L08000046719		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
Lajet-Suryc, LLC		
The new name must be distinguishable and end with the words "Li"L.L.C."	mited Liability Company," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	CAR AR	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	Y OF STA	
(Mailing address MAY BE A POST OFFICE BOX)	D <sub>A</sub>	<u></u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h  Name of New Registered Agent:  New Registered Office Address:		
	, Florid	
	(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 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:

	Manager = Managing Member		
<u>Title</u>	Name	Address	Type of Action
<u>.</u>			Add Remove
······································			Add Remove
			Add Remove
D. If an		ge(s) here: (Attach additional sheets, if necessate original Articles of Organization misidentified	¥.,
	entity as Lajet-Suryk, LLC. The entity's nar	ne is Lajet-Suryc, LLC.	ORE JARY OF ST
Dated Ju	, 2008 CA / 245	<u> </u>	-0
	Signature of a membe	or or authorized representative of a member	
	Keith Durkin, authorized	d representative	<del></del>
	Typec	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00