L08000049510

(F	Requestor's Name)
(/	Address)
(/	Address)
(6	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
L	

Office Use Only





200129668732

05/28/08--01010--018 **25.00

RECEIVED

08 MAY 28 PM 1: 17

08 MAY 28 PM 1: 17

B. KOHR MAY 2 9 2008

EXAMINER

08 HAY 28 AM 8: 35

COVER LETTER

TO: Registration Section of Control		•	
SUBJECT: CAEN	ITERPRISE OF LEC		
	(Name of Lim	ited Liability Company)	
	Amendment and fee(s) are sub	<u>-</u>	OB HAY 28 M. 8: 35
	RON BENFIELD		The state of the s
		(Name of Person)	Tomber 1
		(Firm/Company)	<i>Y</i>
	58 SIOUX CIRCLE		,
		(Address)	
	HAVANA, FL 32333	(C) (C) 171 (C) 1	
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	ali:	
RON BENFIELD		at (850) 539-5171	
(Name	of Person)	(Area Code & Daytime	ſelephone 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 Status & Certified Copy (additional copy is enclosed)
MAIL	ING ADDRESS:	STREET/COURIER	R 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**

i		
ARTIC	CLES OF AMENDMENT	
	TO	Op.
ARTIC	LES OF ORGANIZATION	13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	OF	
		Triby to
C A ENTERPRISE OF LEON LLC		records.)
(Name of the Limited Li	ability Company as it now appears on our orida Limited Liability Company)	records.)
(AFI	orida Limited Liability Company)	`0j/2
The Articles of Organization for this Limited Liab	ility Company were filed on MAY 19, 20	and assigned
Florida document number L08000049510		•
Piorida document number	·	•
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
, <u></u>		
The new name must be distinguishable and end with the	ho words "I imited I inhility Company " the	decignation "LLC" or the abbreviation
"L.L.C."	me words Elimited Liability Company, the	designation LLC of the appreviation
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET A		
Ermeijur Office unuress West DE 71 STREET 7	IDD KBOS	
	1.	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
	 	
B. If amending the registered agent and/or	registered office address on our rec	ords, <u>enter the name of the new</u>
registered agent and/or the new registered offic	e address here:	
Name of New Registered Agent:		
		
New Registered Office Address:	/F DI	side street address?
	(Enter Floi	rida 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	CARLOS PINEDA		Add Remove
· . 			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
			_
Dated MAY 27	, 2008 Re	 BDd	
_	Signature of a member of	or authorized representative of a member	
	RON BENFIELD		
_	Typed o	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00