# LOSCOOSO459

(Re	questor's Name)	
(Ad	dress)	···-
(Ad	ldress)	
•	,	
(0)	- (Ot-t-17)- (Di	40
(Ci	ty/State/Zip/Phone	: #)
PłCK-UP	WAIT	MAIL
(B)	siness Entity Nan	ne)
(50	isiness Entry Han	,
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Charial Instructions to	Elling Officer	1
Special Instructions to	Filing Officer.	,
Shiper and		
•		

Office Use Only



100248488131

100248488131 06/20/13--01022--003 \*\*30.00

2019 JUN 20 AM 8: 10

J. SAULSBERRY EXAMINER JUN 21 2013

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: MOHUL FO	e of Limited Liability Company	
The enclosed Articles of Amendment and fee(s	s) are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Melia	ssa Schumann	
	Name of Person	
Moth	Name of Person  OF Falcon LLC  Firm/Company	gandagaga 2 2 3 1
	Firm/Company 2	[
P.O.	Box 533136	; ]
	Address Address	•
Orlan	do FL 328 53-3135	
Meliss	a. M. Schumanne gmail. Con	$\gamma$
E-mail :	address: (to be used for future annual report notification)	
For further information concerning this matter,	please call:	
Melissa Schuman Name of Person	at (407) 575 468Z  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

Malhor Foldon IId.

Inopher rancon	_		
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company) 10/19/2010	•	
The Articles of Organization for this Limited Liability Company	were filed on LO 8000 504 59	and assigned	
Florida document number <u>L08 0000 50459</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
a II amending name, enter the new name of the inmitted mass	A Secondary Hotel	2013	
The new name must be distinguishable and end with the words "Limit	ted Liability Company," the designation "LLC"		
L.L.C."		20	
Enter new principal offices address, if applicable:		<u> </u>	
Principal office address MUST BE A STREET ADDRESS)			
	7 0 Box 633	125	
Enter new mailing address, if applicable:	P.O. BOX 533 Orlando, FL 329	153	
Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL 32	853-3139	
B. If amending the registered agent and/or registered of	fice address on our records, enter the n	ame 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 7i	n 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:

MGR = Manager MGRM = Managing Member **Type of Action Address** Title <u>Name</u> 228 thorn ton Lane Add John Feleman Orlando, FL 32801 Remove Add Remove Add Remove Add Remove Remove Add Remove

	· ·	
D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
• • • •	hemore John Feloman as a manag	iney
	Member, John Feleman no longer	J
	has ownership in the company,	
Dated	June 17 , 2013	
	Molissa Schuman	
	Signature of a member or authorized representative of a member	
	Melissa Suhumann Typed or printed name of signee	<del></del>
	Page 3 of 3	
	Filing Fee: \$25.00	
	7-	20
		13 J
	Citys Brown Control	02 ANT EIBZ
		20
		<b>₹</b> 17
		PP 🗔
	TO TO THE PARTY OF	5