L08000054397

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
•				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Considerations to Filing Officer				
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JAN - 6 2009

EXAMINER

COVER LETTER

TO:

TO: Registration of Division of	on Section Corporations				
SUBJECT: Gree	en Rake Branding, LLC				
•	(Name of Lim	ited Liability Company)			
The enclosed Article	es of Amendment and fee(s) are sub	omitted for filing.			
Please return all cor	respondence concerning this matter	to the following:			
	Philip Bell				
		(Name of Person)			
	Green Rake Branding, L	LC.			
(Firm/Company)					
	5379 Lyons Road., #105	······································			
		(Address)			
	Coconut Creek, Florida 3	· · · · · · · · · · · · · · · · · · ·	<u>,</u>		
		(City/State and Zip Code)			
For further informat	ion concerning this matter, please c	ali:			
Philip Bell		at (954) 496-4148			
4)	ame of Person)	(Area Code & Daytime To	elephone Number)		
Enclosed is a check	for the following amount:				
2 \$25.00 Filing Fe	e \$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)		
R D P.	EAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Green Rake Branding, LLC.				
(<u>Name of the Limited Lia</u> (A Flo	ibility Compar orida Limited L	ny as it now appears on our recor- iability Company)	<u>ds.</u>)	
The Articles of Organization for this Limited Liabil	lity Company	were filed on06/02/2008	and ass	igned
Florida document number L08000054397	·			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liab	ility company here:		
N/A				
The new name must be distinguishable and end with th "L.L.C."	ie words "Limi	ted Liability Company," the design	ation "LLC" or the a	
Enter new principal offices address, if applicable	e:	N/A	9	<u></u>
(Principal office address MUST BE A STREET A	(DDRESS)			SIO.R ECR
				9 <u>7</u>
			P	LEO RY OF STATE CORPORATION
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE BOX)			2	Skoll
				
B. If amending the registered agent and/or registered agent and/or the new registered office	•		enter the name c	of the nev
Name of New Registered Agent:	N/A			
New Registered Office Address:		(Enter Florida st.	reet address)	
		·	ŕ	
-		, Flor <i>(City)</i>	ida (Zip Cod	le)
		, ••	• •	•

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		
<u>Title</u>	Name	Address	Type of Action
MGRM	Daryl Smith	5379 Lyons Road, #105 Coconut Creek, Florida 33073	Add Remove
MGRM	Armand Rios	5379 Lyons Road, #105 Coconut Creek, Florida 33073	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If am	NIA	er change(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE SECRETARY OF CORPORATIONS OF JAN-5 PM 4:21
Dated	October 22nd Okulij (, <u>2008</u>	
	Signature of Signa	a member or authorized representative of a member	
	Primp ben - Pre	Typed or printed name of signee	·

Page 2 of 2

Filing Fee: \$25.00