L08000054514

(Re	questor's Name)
(Ad	dress)	
(A-1	dress)	
, (Ad	uress)	
, (Cit	y/State/Zip/Phor	ne #)
PICK-UP	· WAIT	MAIL
-		
(Bu	siness Entity Na	ime)
(Do	cument Number	7) ;
Certified Copies	:Certificate	es of Status
		,
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

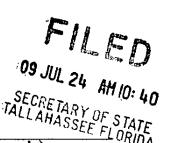
COVER LETTER

Division of Co		·				
SUBJECT:	Gre	een 9 LLC				
SUBJECT:	Name of Limited Liability Company					
The enclosed Articles o	. f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
		Ronald A. Mardosa				
,		Name of Person				
•		Green 9 LLC				
		Firm/Company				
		2230 Stone lake Dr.				
		Address				
	Me	erritt Island, FL. 3295	3			
		City/State and Zip Code mardosa@att.net				
	E-mail address: (1	to be used for future annual rep	ort notification)			
For further information	concerning this matter, please c	all:				
Dar	niel J. Mardosa	at (321)	704-7308			
Name of Person			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 e	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	LING ADDRESS:		COURIER ADDRESS:			
Registration Section Division of Corporations P.O. Box 6327		Registration Section Division of Corporations Clifton Building				

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	Green		- Ana	SSEE FLORIDA
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)	SAIDA
The Articles of Organization for this Limited 1	Liability Company	were filed on	06/03/2008	and assigned
Florida document number L0800005	4514		٠,	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name</u>	of the limited liab	ility company he	<u>re</u> :	
	N / A	4		
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ted Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	cable:	3779 Flypark	Dr.	
(Principal office address MUST BE A STRE	ET ADDRESS)	Rockledge, F	L. 32955	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	Ronald A. Mardosa			
New Registered Office Address:	3779 Flypai			
		Er	nter Florida street add	ress
	F	Rockledge	, Florida	32955
		Citv		Zin 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	Gittings,Richard D.	10675 S.W. Greenridge Lane Palm City, FL. 34990 "Re	☐ Add ☑ Remove
MGRM	Gittings, Marjorie	10675 S.W. Greenridge Lane Palm City, FL 34990 "Re	Add V Remove
mgrm	Mardosa, Ronald A.	2230 Stone Lake Dr. Merritt island, FL. 32953 "Al	✓ Add ☐ Remove
			Add Remove
			Add Remove
<u>, </u>			Add
D. If amen	ding any other information, ente	er change(s) here: (Attach additional sheets, if nece	ssary.)
			69 JUL 24 SECREJIARY
Dated	July 23 ml	2009	OF STATE ORIDA
	Signature of a	n member or authorized representative of a member	
		Ronald A. Mardosa	
		Typed or printed name of signee	

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Filing Fee: \$25.00