L08000060797

(Requestor's Name)
(Address)
(Address)
,
(0), (0), (17), (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Solumbates of Status
Special Instructions to Filing Officer:
,
·

Office Use Only



500137113335

10/28/08--01021--003 **25.00

OBOCT 28 AMIO: 10

COVER LETTER

Division of Corp	orations					
SUBJECT: Hydrah	Systems, LLC		5			
(Name of Limited Liability Company)						
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.				
Please return all correspon	dence concerning this matter	to the following:				
	Cindy Barbara					
		(Name of Person)				
	Alvarez, Almazan & Barb	oara, LLP				
		(Firm/Company)	<u> </u>			
•	0704 0 - 11 0 - 12 - 2	O. 11- 005				
	2701 South Bayshore Dri	(Address)				
· • •		(Addiess)				
Ì	Miami, FL 33133		•			
		(City/State and Zip Code)				
For further information co	ncerning this matter, please co	all:				
Cindy Barbara		at (305) 263-7700				
	of Person) (Area Code & Daytime Telephone Number)		elephone Number)			
Enclosed is a check for the	e following amount:		•			
☑ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Status &			
	Certificate of Status	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)			
			•••			

TO:

Registration Section

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

08 OCT 28 AM IO: 10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Hydrah Systems, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Fl	orida Limited Liability Company)	
The Articles of Organization for this Limited Liabs Florida document number L08000060797	ility Company were filed on Jul	ne 20, 2008 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	e limited liability company he	r <u>e</u> :
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Comp	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		·
B. If amending the registered agent and/or registered agent and/or the new registered office	0	our records, enter the name of the nev
Name of New Registered Agent:		<u>.</u>
New Registered Office Address:		
	(E	nter Florida 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.

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
Title Name

140

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	3-Headed Monster, LLC	2701 South Bayshore Drive, Suite 305 Miami, FL 33133	Add Remove
MGRM	Richard L. Barbara	2701 South Bayshore Drive, Suite 305 Miami, FL 33133	Add Remove
<u> </u>			Add Remove
· ·			Add Remove
	 		Add Remove
			Add Remove
D. If amendii	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	BOCT 28 M
			MIO: 10
Dated <u>October</u>	4	Mellen	
-	Y	r or authorized representative of a member	
_	Richard L. Barbara	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00