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(Ro	equestor's Name)	
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M. THOMAS

JUL 1 4 2008

EXAMINER

COVER LETTER

3 A	li,	COVER LETTER	
TO: Registration S Division of Co			*
SUBJECT:	PAVLOV F	toloings Co L	LC.
	(Name of Lim	nited 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:	
	B	OYAN PAVLOV (Name of Person)	
		(Name of Person)	
	PAVL	ov HOLDINGS CO	LLC
		(Firm/Company)	
	3436	(Address)	OB JUL 11
		(Address)	宝龍 一
		City/State and Zip Code)	9 % 至
		(City/State and Zip Code)	S. F.
For further information	concerning this matter, please c	all:	ORDE
BoyAn	PAVLOV	at (813) 838 - 01 (Area Code & Daytime T	30
(Name	of Person)	(Area Code & Daytime T	elephone 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)

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**

P.	AVLOV 1	toldings	Co LLC	-
(<u>Name of the Limited Li</u> (A Fl	ability Compa orida Limited I	ny as it now appear liability Company)	rs on our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L0800065</u>		were filed on	July 7th,	
This amendment is submitted to amend the follow	ing:			08 JH 1.
A. If amending name, enter the new name of the	<u>ie limited liab</u>	ility company her	<u>e</u> :	A OF ST
The new name must be distinguishable and end with the "L.L.C."	he words "Limi	ted Liability Compa	ny," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable	le:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered offic			our records, <u>ent</u>	er the name of the ne
Name of New Registered Agent:		Boyan	PAVLOV	
New Registered Office Address:		3436 RED (Er	ROCK (Or address)
<u>-</u>		O LAKE	•	
New Registered Agent's Signature if changing Reg		(Chy)		(Esp Coue)

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, enter the title, name, and address of each Manage or Managing Member being added or removed from our records:

MGR = Manager

MGRM = N	Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	 		Domaria
			S Add A
			° F Ωomo€o
			Add Remede
		<u> </u>	
			
			Add Remove
			Pomovo
D. If amend	ding any other information, e	nter change(s) here: (Attach additional	
			
Dated	JULY 87H	, <u>2008</u> .	
	Signature	of a member or authorized representative of	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00