L08000074318

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12 JUN 25 PM 3: 29

C. LEWIS

JUN 2 8 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KAREN PETREILA C ASSOCIATES LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
KAREN PETREJIA
KAREN PETRETIA C ASSOCIATES LLC Firm/Company
7158 BOBALINK Ct. Address
City/State and Zip Code KAREN PETLETIA C CONCAST, NET E-mail address: (to be used for future annual report notification)
KAREN PETREJIA C COMCAST, NET
For further information concerning this matter, please call:
Name of Person at (50) 714-7070 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{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 OT ARTICLES OF ORGANIZATION

FILED

	OF	12 JU	IN 25 PM 3: 29
SAVE The (Name of the Limited Line) (A F	EN UIRNO MEN ability Company as it now appears on lorida Limited Liability Company)	our records.	JARO OF STATE HASSEE, FLORIDA
The Articles of Organization for this Limited Liab Florida document number <u>L0800007</u>	ility Company were filed on8 - 4318.	-1-2008	and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the house of t	in a Association 11	the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab			
(Principal office address MUST BE A STREET	ADDRESS) 7/58 B LAKE W	ORTH, FL	(t. 33467
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	0x) - 7158 k - Auke b	OUBIALINK WORTH, FL	ct. 33467
B. If amending the registered agent and/or registered agent and/or the new registered office		records, <u>enter tl</u>	he name of the new
Name of New Registered Agent:	KAREN M. PE	tRETIA	
New Registered Office Address:	7158 BOBALINK Ct. Enter Florida street address AKE WORTH, Florida 33467 City Zip Code		
	KAKE WORTH	Tionida	33467
	City	, r ioria a	Zip Code
New Registered Agent's Signature, if changing Re			•

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

Page 1 of 2

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:

MGRM =	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Add Remove
			Add Remove
			Add
			Remove
			AddRemove
1	nding any other information, $MBRM$	enter change(s) here: (Attach additional she	eets, if necessary.)
_	^	KAREN M. CA	100 MIODIE INITIAL) ORRECT STREET NUMBER -
-		H, FL 33467	<u>ORRECT STREE</u> T NUMBER – 7258 INCORRECT
Dated	June 20		12 JU
4	Signature	Wer M. Lettelland of a member or authorized representative of a m	12 JUN 25 PM 3: 29 MALLASIA SSEE, FLORIDE
		HAREN MI HETRETIA Typed or printed name of signee	
		Page 2 of 2	200

Filing Fee: \$25.00