(Requestor's Name)				
(A	ddress)	· · · · · · · · · · · · · · · · · · ·		
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(A	ddress)			
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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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EXAMINER



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SECRETARY OF STATE
AND LAHASSEE, FLORIDA

COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

	Registration Sec Division of Corp					
SUBJEC	Т:	Font	anot, L.L.C.			
505420	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:						
			Jeanette Bowdell			
	Levin Tannenbaum, P.L.					
	Firm/Company					
1680 Fruitville Road, Suite 102						
			Address			
Sarasota, FL 34236						
	City/State and Zip Code JBowdell@LevinTannenbaum.com E-mail address: (to be used for future annual report notification)					
For furthe	er information co	ncerning this matter, please c	·	,		
	Jean Name of	ette Bowdell Person	at (941) 3 Area Code & Daytime	08-3154 Telephone Number		
Enclosed	is a check for the	e following amount:				
\$25.00) Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Registrat	NG ADDRESS: tion Section of Corporations	STREET/COURIE Registration Section Division of Corporat	·		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fontano (Name of the Limited Liability Compa			
(A Florida Limited I	Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed onAugust 11, 2008 and assigned		
Florida document numberL08000077125			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviatio		
Enter new principal offices address, if applicable:	355 Monroe Drive, Suite 205		
(Principal office address MUST BE A STREET ADDRESS)	Sarasota, FL 34236		
Enter new mailing address, if applicable:	355 Monroe Drive, Suite 205		
(Mailing address MAY BE A POST OFFICE BOX)	Sarasota, FL 34236		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:			
	Enter Florida street address		
New Registered Agent's Signature, if changing Registered Agent:	City To Codes Code		

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 Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Maria del Pilar Pedroza	355 Monroe Drive Suite 205 Sarasota, FL 34236	Remove
			Add Remove
			Add
			Add Remove
			Add Remove
			Add Remove
D. If amer —	nding any other information, enter	change(s) here: (Attach additional sheets, if necessor	ury.)
_			
_			
Dated\	tprel 29.	2010	
	Signature of a t	member or authorized wresentative of a member Manuel Fontanot	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00