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T. HAMPTON

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FXAMINER

COVER LETTER

TO: Registration S Division of Co						
SUBJECT:	Tele A	nacaona, LLC				
	Name of Lim	ited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	condence concerning this matter	r to the following:				
	Martine Joseph					
		Name of Person				
	Tele Anacaona, LLC					
Firm/Company						
		P.O.Box 681118				
		Address				
		Orlando, FL. 32868				
City/State and Zip Code						
martine_joseph@hotmail.com E-mail address: (to be used for future annual report notification)						
For further information	concerning this matter, please of					
Martine Joseph			138-3614			
Name	of Person	Area Code & 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 enclosed)	S60.00 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

FILE'D

2011 OCT 28 PM 12: 02

			- - ·			
(Name of the Limited)	Tele Anaca	aona, LLC	Section 1935	OF STAIR		
(<u>Name of the Limite</u>	d Liability Compa	ny as it now appears	on our records \$55	EC. FLURIDA		
(4	A Florida Lillilled I	Liability Company)				
The Articles of Organization for this Limited L	iability Company	were filed on	8/11/2008	and assigned		
Florida document number L0800007						
Tionaa accament names.	•					
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liab	oility company here	:			
, <u> </u>	N/A					
The new name must be distinguishable and end w			v." the designation "I	LC" or the abbreviation		
"L.L.C."	in the words Emi	ned Endomey Compan	y, me designation i			
Enter new principal offices address, if appli	2834No HIAWASSEE Rd					
(Principal office address MUST BE A STREE	orlando, Fl. 32818					
(Frincipus Office address MOST BE A STREE	DETATION	1, 0,0,	4610			
			· · · - ·			
Enter new mailing address, if applicable:	P.O. Box 681118 Orlando, FL. 32868					
(Mailing address MAY BE A POST OFFICE						
			···			
B. If amending the registered agent and			ir records, <u>enter t</u>	he name of the nev		
registered agent and/or the new registered o	mice address her	<u>'e</u> :				
Name of New Registered Agent:	Martine Jos	ne Joseph				
New Registered Office Address:	2834 N, Hia	wassee Rd.				
	er Florida street add	ress				
		Orlando,	, Florida	32818		
		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.

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 Type of Action Title Name Address MGRM Landry Menard 6541 N. OBT. Orlando, FL. 32808 Remove Ste 600___ Landry Menard MGR 6541 N. OBT, Orlando, FL. 32808 ✓ Add Remove Ste 600 Remove Add Remove __Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 24 2011 Dated Signature of a member or authorized representative of a member Martine Joseph Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00