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SECRETARY OF STATE
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COVER LETTER

TO: Registration Se	ction porations		
SUBJÈCT:	A hish Eine (Name of Name	Sec Vices LLC ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	(Name of Person)	
	HOA L	Sheing Solvices 1	LLC_
	200 Gle	scry Ct Ast	208
	Porham,	NC 27707 (City/State and Zip Code)	
For further information of	concerning this matter, please c		
Mayy the m	of Person)	at (<u>954) <i>812 -02/4</i></u> (Area Code & Daytime 1	Telephone Number)
Enclosed is a check for the	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)
24.11	ING ADDDESS	CTDCUT/COUDIE	A ADDRESS.

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

(Name of the Limited Liability Compan (A Florida Limited D	Ky as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limit "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ted Liability Company," the designation "LLC" or the abbreviation According to the designation "LLC" or the abbreviation "LLC" or the a
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	Chem Mahmood Werrick Lane (Enter Florida street address) (City) (City) (Enter Florida Street address) (City)
The Committee of the supplier	مر

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

1	Name	<u>Address</u>	Type of Actio
			Add
			Add Remove
·			Add Remove
			Remove
			Add Remove
			= -
amend	ling any other information, enter o	change(s) here: (Attach additional sheets, if necess	sary.)
_		, , , , , , , , , , , , , , , , , , ,	08 / SEC
	,	·	
	Signature of a m	ember or authorized representative of a member	
	Havitlen Ma	Mnooud Typed or printed name of signee	8: 49

Page 2 of 2

Filing Fee: \$25.00