## L080000088304

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	· #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	cument Number)			
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S. HAWKES

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EXAMINER

## **COVER LETTER**

TO:	Registration So Division of Co			
SUBJE	ECT:	VanDras	ek-Holmes LLC	
		Name of Limit	ted Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			scott holmes	
Name of Person				
VonDrasek-Holmes LLC				
Firm/Company				
10			0209 Bennington Dr	
Address				
tampa, fl 33626				
City/State and Zip Code				
		sco	tthgroup1@verizon.net to be used for future annual report notifical	41\
			•	uon)
For fur	ther information of	concerning this matter, please c	all:	
	s	cott holmes	at ( )	14-0214
	Name	of Person .	Area Code & Daytime T	elephone Number
Enclos	ed is a check for t	the following amount:		
\$25	5.00 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

TO:

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

	/anDrasek-Holmes LLC			
( <u>Name of the Limited</u>	Liability Company as it now appear Florida Limited Liability Company)	s on our records.)		
(^	Profita Ennice Elability Company)	6		
The Articles of Organization for this Limited Li	ability Company were filed on	09/15/2008 and assigned		
Florida document number L08000088	3204	76		
This amendment is submitted to amend the follow.  A. If amending name, enter the new name of	•	09/15/2008 A Cand assigned (1)		
- · · · · · · · · · · · · · · · · · · ·		<u>e</u> .		
	VonDrasek-Holmes LLC			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	TADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<i>BOX</i> )			
B. If amending the registered agent and/	or registered office address on o	our records, enter the name of the new		
registered agent and/or the new registered of	fice address here:			
Name of New Registered Agent:	<b>****</b>			
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = M	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			\$ 1 T
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D. If amen	ding any other information	, enter change(s) here: (Attach additional sheets,	if necessary.)
****			
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Dated	April 26		
		latter land	
	Signatu	re of a member or authorized representative of a memb	ег
		Scott Holmes	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00