

L08000088762

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09 NOV 20 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN  
NOV 23 2009  
EXAMINER

**LAW OFFICES OF  
ROSE & ROSE, P.A.**

ANDREW C. ROSE\*  
[Arose6@bellsouth.net](mailto:Arose6@bellsouth.net)  
PETER A. ROSE\*  
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\*ALSO LICENSED IN TEXAS

1800 N.W. CORPORATE BLVD.  
SUITE 302  
BOCA RATON, FL 33431  
TELEPHONE: 561-394-4995  
BROWARD LINE: 954-561-5000  
FACSIMILE: 561-417-6692

Fort Lauderdale Location:  
THE WILTON CENTRE-STE. 400  
2101 NORTH ANDREWS AVENUE  
FORT LAUDERDALE, FL 33311  
**REPLY TO: BOCA RATON**

OF COUNSEL:  
ROBERT L. KING  
JAMES O. BIRR, JR.  
November 16, 2009

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: MRJS, LLC  
File No.: PAR-9430

Dear Sir or Madam:

Enclosed please find for filing the Articles of Amendment to the Articles of Organization for the above. Our check representing the required filing fee of \$25.00 is enclosed.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

PETER A. ROSE, ESQ.  
For the Firm  
PAR/lf  
Enclosure

Signed in Mr. Rose's absence to  
expedite delivery.

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**MRJS LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/18/2008 and assigned  
Florida document number L08000088762.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

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**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

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 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	STOLTZ, JOHN		<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated November 16, 2009

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\_\_\_\_\_  
 Signature of a member or authorized representative of a member  
Peter A. Rose  
 Typed or printed name of signee