

L08000094133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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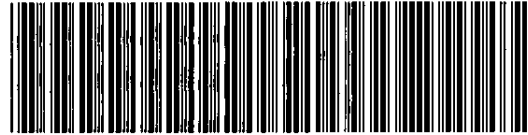
(Business Entity Name)

(Document Number)

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11 JUN 21 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUN 22 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pontoon LLC
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:

Janet Lyons

Name of Person

Pontoon LLC

Firm/Company

550 Orange Drive # 4

Address

Altamonte Springs, FL 32701

City/State and Zip Code

jlyons15@cfl.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janet Lyons

Name of Person

at (407)

756-9231

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)

☐ \$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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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11 JUN 21 AM 9:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pontoon 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 10/06/2008 and assigned
Florida document number L08000094133.

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)

550 Orange Drive # 4

Altamonte Springs, FL 32701

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

550 Orange Drive # 4

Altamonte Springs, FL 32701

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:

Janet Lyons

New Registered Office Address:

550 Orange Drive # 4

Enter Florida street address

Altamonte Springs

, Florida

32701

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

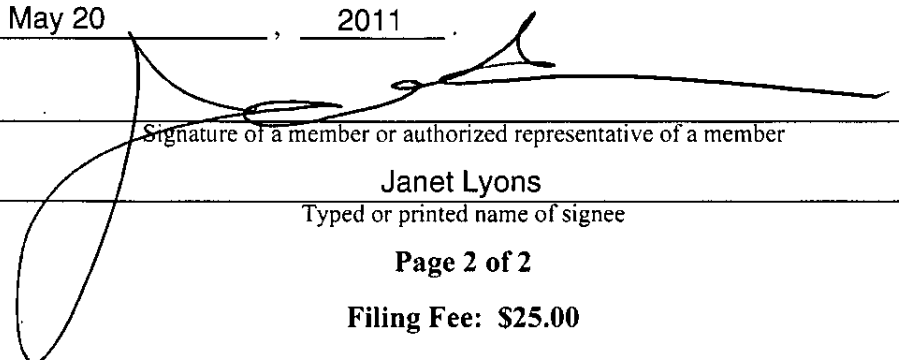
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Janet Lyons	550 Orange Drive # 4 Altamonte Springs, FL 32701	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Manny Vargas	614 Orange Drive # 200 Altamonte Springs, FL 32701	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Tara Schweizer	PO Box 471206 Lake Monroe, FL 32714	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Susan Van-Bernum	PO Box 471206 Lake Monroe, FL 32714	<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

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

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11 JUN 21 AM 9:46
STATE OF FLORIDA
TALLAHASSEE

Dated May 20, 2011



Signature of a member or authorized representative of a member
Janet Lyons

Typed or printed name of signee