## 08000097730

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Document Number)				
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J. BRYAN

NOV 2 4 2008

**EXAMINER** 

## **COVER LETTER**

	ion Section of Corporations
SURJECT:	(Name of Limited Liability Company)
5 <b>030301</b>	(Name of Limited Liability Company)
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.
Please return all co	rrespondence concerning this matter to the following:
	Mys. in Felsha Sancher (Name of Person)
	FLD Codering LLC (Firm/Company)
	9759 Slue Stave C.'r  (Address)  Ft Myers F1 33913  (City/State and Zip Code)  ation concerning this matter, please call:
	Ch 1 TI 22917
	Ft Myers F1 33913 (City/State and Zip Code)
	ation concerning this matter, please call:
Myran	Felisha Sancher at (239) 976-1687  (Area Code & Daytime Telephone Number)
(1	Name of Person) (Area Code & Daytime Telephone Number)
Englosed is a shook	c for the following amount:
\$25.00 Filing Fo	-
	Certificate of Status  Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section
D	Division of Corporations  C.O. Box 6327  Division of Corporations  Clifton Building
	Fallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FLD CoDEING 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 Oct 16,2008 and assigned Florida document number L08000097730.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liab	lity company here:		
FLD CODING LLC			
The new name must be distinguishable and end with the words "Limi"L.L.C."			
Enter new principal offices address, if applicable:	Ft Myers, Fl 33918		
(Principal office address MUST BE A STREET ADDRESS)	Ft Myers, F1 33918		
Enter new mailing address, if applicable:	9759 Blue Store C.r Ft Myers, F1 33913		
(Mailing address MAY BE A POST OFFICE BOX)	Ft Myers, F1 33913		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:			
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 = M MGRM =	lanager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
<u> </u>			Add Remove
			Add Remove
			Add Remove
			Add
<del></del>			Add Remove
D. If ame	nding any other information, enter change  Ths + need + Corre	e(s) here: (Attach additional sheets, if necessary.)	
- -	Buisness Name.	ect the spelling of the	OB NOV 2
_ _ Dated			CORPORATION  AMIL: 27
Dated	Myrian Lalisha l Signature of a member Myrian Felisha	or authorized representative of a member	
	Myriam Felisha Typed	or authors of a member of a member of a member of signee	

Page 2 of 2

Filing Fee: \$25.00