## 199000101286

(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dushiess Littly Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





700137472027

M. THOMAS

NOV - 4 2008

**EXAMINER** 

## COVER LETTER 👞

1.

TO: Registration Section Division of Corporations
SUBJECT: EV netics, 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:
Sebastien Bourgeois (Name of Person)
Evnetics, LLC (Firm/Company)
2025 4th Ave 5, Suite C
2025 4th Ave 5, Suite C  (Address)  St Petersburg, FL 33712  (City/State and Zip Code)
For further information concerning this matter, please call:
For further information concerning this matter, please call:  Sebastien Bourgeois at 727, 823-6766  (Name of Person)  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S25.00 Filing Fee
MAILING ADDRESS:  Registration Section  STREET/COURIER ADDRESS:  Registration Section

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

400

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	netics, LLC	
( <u>Name of the Limited Liability</u> (A Florida I	Company as it how appears on our re- Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C	Company were filed on October	r 29, 2008 and assigned
Florida document number L080001012		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADDR	(ESS)	ASS SE
		APP Q
<b>-</b>		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address on our records r <u>ess here</u> :	s, enter the name of the new
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 Type of Action <u>Title</u> **Address** <u>Name</u> Jeffrey Jenkins ☐ Add Remove ₫ Add Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) october-2008. Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00