Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : Ala REGISTERED AGENT INC.

Account Number : I20090000032 : (561)792-2236

Fax Number : (561)202-8082

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** Email Address: ROCKETSELBY

LLC <u>AMND</u>/RESTATE/CORRECT OR M/MG RESIGN FREEDOM SERVICES SOLUTIONS LLC

Certificate of Status	0
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Corporate Filing Menu

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561-202-8082 p.2

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FREEDOM SERVICES SO (Name of the Limited)		v as it now appears on cability Company)	our records.			
The Articles of Organization for this Limited Lia Florida document number L08000104325				and assigned		
This amendment is submitted to amend the follo A. If amending name, enter the new name of	_	ility company here:	LABASSE LABASSE	FIL.		
LYRAN EQUIPMENT LLC	the minera may	mry company not a	्ता त्या त्या त्या त्या त्या त्या त्या त			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company,"	the designation LC			
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		382 NE 191ST STREET # 53098 1				
		MIAMI, FL 33179				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE A	в <i>ох</i>)	382 NE 191ST S		8		
B. If amending the registered agent and/or the new registered of			records, enter the	name of the net		
Name of New Registered Agent:	A1A REGI	STERED AGENT I	NC.			
Hen Registered Office Address.	5647 110T	H AVENUE NORT	H Florida street addres	20		
	POVAL DA	LIME BEACH				
	ROTALPA	City	, Florida <u>334</u>	Zip Code		
New Registered Agent's Signature, if changing i	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

Page 1 of 3

MGR = Manager

H13000257156 3

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:

Title	Name	Address	ype of Action
MGR_	Spina, Joseph LIV	2236 Fruitville Rd	Add
		Sarasota, FL 34237	Remove
	Outher Date 4	40000 F01 Ot F	
MGRM	Selby, Robert	12003 52nd Ct E	Add
		Parrish, FL 34219	Remov
MGRM	Spina, Joseph IV	1650 Blakemore Lane	
		Sarasota, FL 34231	Remov
	•		
MGR	Draconis Equipment LLC	382 NE 191st St ≠ 53098	Add
		Miami, FL 33179	Remove
 -			Add
			Remov
			Add
			Remove

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. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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ited	11-20-13
	Signature of a member or authorized representative of a member Ooksert Seiby
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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