## [D8000/06/18

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T. CLINE

OCT -9 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration Division of	n Section Corporations			
SUBJECT:	Comp	Wizards LLC	•	
		ited Liability Company		
The enclosed Articles	s of Amendment and fee(s) are su	bmitted for filing.	•	
Please return all corre	espondence concerning this matte	r to the following:		
	,	Hayden Burrus	·	
		Name of Person		
		Comp Wizards LLC		
` .		Firm/Company		
,	-	2360 NW 45th St.	•	
		Address	e de la companya de La companya de la companya de l	
	. E	Boca Raton, FL 33431		
		City/State and Zip Code		tat 653
	hburrus(	@comppremiumwizar	ds.com	
	E-mail address: (	to be used for future annual rep	ort notification)	
For further information	on concerning this matter, please	call:	,	ASSECTION OF 21
	Hayden Burrus	at (_561_)	279-2323	
Nar	me of Person	Area Code &	Daytime Telephone Number	AMID: 53
Enclosed is a check f	for the following amount:			<del>ώ</del> . · · · ω
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	enclosed) Certified	e of Status &
MA	AILING ADDRESS:	STREET/O	COURIER ADDRESS:	

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Comp Wizards LLC			
(Name of the Limite	d Liability Company as it now appears A Florida Limited Liability Company)	on our records.)		
	A Florida Elimed Elaothty Company)	•		
The Articles of Organization for this Limited I	Liability Company were filed on No.	ovember 14, 200	8 and assign	ed
Florida document numberL0800010	)6118			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liability company here	:		
The new name must be distinguishable and end w	rith the words "Limited Liability Compar	v." the designation "L	LC" or the abbr	eviation
"L.L.C."	,			
Enter new principal offices address, if appli	cable		<b>学</b> 2000	
•	<del></del>			
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		= =	- 13 (12 (12 (12 (12 (12 (12 (12 (12 (12 (12
			<u> </u>	action:
			भिद्ध 📑	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u> </u>		ر المنظمة	
			<u> </u>	
B. If amending the registered agent and		ur records, <u>enter t</u>	<u>he name of tl</u>	ne new
registered agent and/or the new registered (	office address here:			
Name of New Registered Agent:	Hayden Burrus			
New Registered Office Address:	10 Northeast 6th Street, Sui	ite 200		
Now Hogistered Street Hadisso.	Ente	er Florida street add	ress	
	Delray Beach	, Florida	33444	
	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

Page 1 of 2

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			T Domovio
			D Pamaya
			Add Remove
<del></del>	<del></del>		Add Remove
			Adar Da-Greffibve
			Add
D. If amer	nding any other information, enter c	hange(s) here: (Attach additional sheets,	if necessary.)
_			
_			***************************************
 Dated			?
	Signature of a me	ember or authorized representative of a member of a me	muler per
		yped or printed name of signee	<u>לעוןעי</u>

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Filing Fee: \$25.00