-L080001/3358

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
•				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filing Officer.				
A				
A. LUNT				
MAR -3 2010				
EXAMINER				

Office Use Only



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2010 HAR -2 PH 1: 33
SECRETARY OF STATE
TALLAHASSEE F. STATE

1/5/2010

Jo growth amendment, forrame change Arom: SENIOR BIZ LLC

Jo: SMITHTOWN USA LLC

L08000 113358



January 8, 2010

SENIOR BIZ LLC 4210 42ND WAY WEST PALM BEACH, FL 33407

SUBJECT: SENIOR BIZ LLC Ref. Number: L08000113358

We have received your document for SENIOR BIZ LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 110A00000676

COVER LETTER

TO:	Registration Section Division of Corporations		·	是是 五
SUBJ	ЕСТ:	SENIO Name of Limite	R Biz LLC ed Liability Company	R-2 PH
The en	nclosed Articles of Amendmer	nt and fee(s) are subr	nitted for filing.	33
Please	return all correspondence cor	cerning this matter t	o the following:	V
			NDA G. JOSEPH	1
		SMI	THTOWN USA Firm/Company	LLC
		421	10 42 ND WAY	/
		WEST	PALM BEACH, I City/State and Zip Code	= 133407
		LGU E-mail address: (te	OSEPH O YAHOO. Obe used for future annual report notificat	Com-
For fu	rther information concerning	his matter, please ca	ill:	
	Name of Person	seph	at (<u>561) </u>	648 elephone Number
Enclos	sed is a check for the followin	g amount:		
\$2.	5.00 Filing Fee (1530.0 Cer	0 Filing Fee & tiffcate 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JENI			
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears of Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on DECE	MBER 11,2008 and assigned	
Florida document number080001133	58		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
SMITHTOV		west .	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company	"the designation "LECE or the bbreviation	
Enter new principal offices address, if applicable:	·	AS AS	
(Principal office address MUST BE A STREET ADD	RESS)	\$ \$ \$ \$	
•	Water the second		
		ORATI	
Enter new mailing address, if applicable:		2m 3	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office ade		records, 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 = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			Add Remove
			20 AGE
			RR -2
			-
			ਜ਼ੀ ਲੂ Add Remove
D. If amend	ling any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary.)	
			<u>. </u>
**************************************			_
			
Dated Fi	EBRUARY 18 , 2		
	Signature of a me	mber a nuthorized representative of a member	· · · · · · · · · · · · · · · · · · ·
	LINDA (G, JOSEPH yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00