

# LD8000114099

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

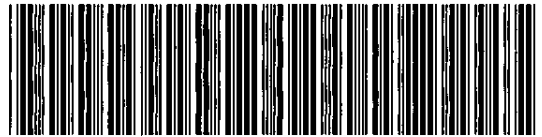
\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JAN 13 PM 2:49

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**C. LEWIS**

JAN 14 2009

**EXAMINER**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: A&O BUSINESS

(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:

CRIS RAMOS

(Name of Person)

JADE & 8 INVESTMENTS LLC

(Firm/Company)

1420 CELEBRATION BLVD SUITE 200

(Address)

CELEBRATION .FL.34747

(City/State and Zip Code)

For further information concerning this matter, please call:

CRIS RAMOS

(Name of Person)

at ( 407 ) 3010943

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 8, 2009

CRIS RAMOS  
A&O BUSINESS  
1420 CELEBRATION BLVD., STE. 200  
CELEBRATION, FL 34747

SUBJECT: A&O BUSINESS, LLC  
Ref. Number: L08000114099

We have received your document for A&O BUSINESS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration Section

Letter Number: 609A00000578

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A&O BUSINESS 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 12-15-08 and assigned  
Florida document number LO8000114099

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

N/A

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1420 celebration Blvd  
SUIT 200 . Celebration  
FL. 34747

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

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

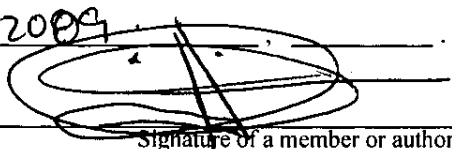
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ALEXANDRA MENDEZ	1420 CELEBRATION BLVD SUITE 200 CELEBRATION .FL 34747	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ELIZABETH ANGELINO	1420 CELEBRATION BLVD SUITE 200 CELEBRATION .FL 34747	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JUAN CARLOS LACA	1420 CELEBRATION BLVD SUITE 200 CELEBRATION .FL 34747	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	EDUARDO LACA	1420 CELEBRATION BLVD SUITE 200 CELEBRATION .FL 34747	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	OMAR ANGELINO	1420 CELEBRATION BLVD SUITE 200 CELEBRATION .FL 34747	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 01/05/2009



Signature of a member or authorized representative of a member

OMAR ANGELINO

Typed or printed name of signee

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TALLAHASSEE, FLORIDA