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J. BRYAN

FEB 26 2009

**EXAMINER** 

# **COVER LETTER**

Division of Corp			
SUBJECT:	MESSA, L	LC	
	(Name of Lim	ited Liability Company)	<del></del>
	Amendment and fee(s) are sub	to the following:	
	Joseph Ze	(Name of Person)	
	<b>担</b> MESSA,	(Firm/Company)	09 FEB
	10130 NW	(Address)	TARY ASS
	Sunrise,	47th Street (Address)  FLORIDA 33351 (City/State and Zip Code)	EB 25 AH II: 25 AH ASSEE, FLORID
For further information co	oncerning this matter, please c	all:	
Joseph 26 (Name of	Person)	at (954) 742-824 (Area Code & Daytime T	(Felephone Number)
Enclosed is a check for the	e 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MESSA, 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 \_ and assigned Florida document number <u>L090000449</u>\$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: JOSEPH ZEVULONI Name of New Registered Agent: 10130 NW 47h Street
(Enter Florida street address)

Sunrise , Florida 33351 New Registered Office Address:

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.

ging Registered Agent, Signature of New Registered Agent)

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member Type of Action Title Address Name MGR Esther Zevoloni \_ Add **Remove** M6R 🗂 Add Remove ☐ Add Remove ☐ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessar 2009 Signature of a member or authorized representative of a member HF320T 2EVULON1 Typed or printed name of signee

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Filing Fee: \$25.00