19900007209

(Requestor's Name) (Address)	
(Address)	900157385469
(City/State/Zip/Phone #)	
(Business Entity Name)	07/06/0901010017 **25.00
(Document Number)	
Certified Copies (1.6.1.4	TALLAHAT SECRETA
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Office Use Only

M. THOMAS
JUL 1 6 2009
EXAMINER

COVER LETTER

	Registration Section Division of Corporations	
SUBJECT	r: Meelanick Realty LLC	
	Name of Limited Liability Company	
The enclos	sed Articles of Amendment and fee(s) are submitted for filing.	
Please retu	urn all correspondence concerning this matter to the following:	
	Seyed Etezadi Name of Person	
	Name of Person	
	Firm/Company	
	101 Spring 5+ Address	超量 工
	·	語場に
	medfield ma 02052 City/State and Zip Code e tezadi m @ Yahoo. Com E-mail address: (to be used for future annual report notification)	E. FLOR
For further	E-mail address: (to be used for future annual report notification) r information concerning this matter, please call:	ADA S
	Name of Person Area Code & Daytime Telephone Number	<u>2813-766-6547</u>
Enclosed i	is a check for the following amount:	
∑\$2 5.00	(additional copy is enclosed) Certified	te of Status &

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



July 7, 2009

SEYED ETEZADI 101 SPRING ST. MEDFIELD, MA 02052

SUBJECT: MEELANICK REALTY LLC

Ref. Number: L09000007209

We have received your document for MEELANICK REALTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been fled and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 509A00023117

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Meelanick Rea	ilty LLC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>LO900007209</u>	were filed on 1-12 - 2009 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
Meelanick H	It to amend the following: If the new name of the limited liability company here: Medanick Homes LLC uishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation address, if applicable: UST BE A STREET ADDRESS) It is applicable: A POST OFFICE BOX) Itered agent and/or registered office address on our records, enter the name of the new new registered office address here: Stered Agent: Enter Florida street address Florida Florida
	ed Liability Company," the designation "LLC" or the abbreviation
"L.L.C." Enter new principal offices address, if applicable:	PER T
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SEE FLORIDA
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here 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.

F . Y

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:

	nager Nanaging Member		
<u>le</u>	<u>Name</u>	Address	Type of Act
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			Remove
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lf amen	ling any other information, en	ter change(s) here: (Attach additional shee	ts, if necessary.)
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			<u> </u>
ed	July 13	, <u>2009</u> .	
	5		
	Signature of	a member or authorized representative of a med SEYED ETEZA	mber

Page 2 of 2

Filing Fee: \$25.00