## L09000007987

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C. LEWIS

AUG 3 1 2010

EXAMINER

## **COVER LETTER**

Division of Co					
SUBJECT:	Melady Enterprises LLC.				
	Name of Limi	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
		Luca Balenzano			
•		Name of Person			
:	Me	Melady Enterprises LLC.			
	Firm/Company				
•	49 N. Federal Highway, 井153				
		Address			
	Pompano Beach, FL 33062				
	City/State and Zip Code				
M.	meladyellc@aol.com  E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please of				
Lu	ıca Balenzano	at ( 954 ) 782-0039			
Name of Person		Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section		STREET/COURIER ADDRESS: Registration Section			

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

FILED

2010 AUG 30 PM 12 14

Melady En	terprises LLC.	SEC	RETARY OF STATE AHASSEE: FLORID	
(Name of the Limited Liability Con (A Florida Limite	ipany as it now appear ed Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Comp.  Florida document number L0900007987	any were filed on	01/23/2009	and assigned	
Torra document named				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	iability company her	<u>e</u> :		
;				
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Compa	ny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:	49 N. Federa	l Highway <i>, # 15</i>	3	
(Principal office address MUST BE A STREET ADDRESS		Pompano Beach, FL 33062		
	<del></del>	·	A	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
	<del></del>			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:			····-	
New Registered Office Address:	En	ter Florida street add	ress	
<del></del>	City	, Florida	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>Address</u> **Name Type of Action MGRM** Ester Balenzano 2001 Bay Drive ☐ Add Pompano Beach, FL 33062 Remove MGR Linda B. Roberts 332 NE 29th Street ✓ Add Remove Wilton Manors, FL 33334 ☐ Add Remove Add Remove  $\prod Add$ Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 2 Dated \_ ignature of a member or authorized representative of a member Luca Balenzano

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Typed or printed name of signee

Filing Fee: \$25.00