L090001041

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COVER LETTER

Division of Cor	porations							
SUBJECT:	NEBULA HOLDINGS, LLC							
	Name of Limited Liability Company							
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.						
Please return all correspo	ndence concerning this matter	to the following:						
	STEPHEN M RAVIDA							
	Name of Person							
	RAVIDA ENTERPRISES, LLC							
	Firm/Company							
	13230 LAZZARO CT							
	Address							
	ESTERO, FL 33928							
	City/State and Zip Code							
	Steve@ravidanet.com E-mail address: (to be used for future annual report notification)							
For firsther information o								
roi luttiei information c	oncerning this matter, please of	an.						
STEPHEN M RAVIDA		at (239)	494-8316					
Name of Person		Area Code & Daytime Telephone 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 enclose	Section 1 Section 1 Section 2 Sectio					
STEPI	E-mail address: (in poncerning this matter, please of the second of Person the following amount:	Firm/Company 13230 LAZZARO CT Address ESTERO, FL 33928 City/State and Zip Code teve@ravidanet.com to be used for future annual report noticeall: at (239) Area Code & Daytin	494-8316 me Telephone Number \$60.00 Filing Fee, Certificate of Status & Certified Copy					

MAILING ADDRESS:

TO:

Registration Section

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



09 AUG -3 AM 10: 54

NE NE	BULA HOL	DINGS, LLC		RETARY OF STATE
NE (<u>Name of the Limited I</u> (A F	Jiability Compai Florida Limited L	ny as it now appears (liability Company)	on our records DLL	AHASSEE FLORIDA
The Articles of Organization for this Limited Lia Florida document number L090000106	bility Company			and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	the limited liab	ility company here:		
RAV	IDA ENTER	PRISES, LLC		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company	," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applica	13230 LAZZARO CT			
(Principal office address MUST BE A STREET	ESTERO, FL 33928			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	13230 LAZZARO CT ESTERO, FL 33928			
B. If amending the registered agent and/or registered agent and/or the new registered offi	ce address her	<u>e</u> :	r records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	STEPHEN N	M RAVIDA		
New Registered Office Address:	ARO CT			
		Enter	· Florida street add	ress
		ESTERO	, Florida	33928
	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> **Type of Action** Add Remove Add Remove ☐ Add Remove Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JULY 27** 2009 Dated_ Signature of a member or authorized representative of a member STEPHEN M RAVIDA, MANAGING MEMBER Typed or printed name of signee

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Filing Fee: \$25.00