# L09000014205

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PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

#### COVER LETTER

TO:

Registration Section **Division of Corporations** 

# DUR LOVE WILL TURN YOU ON, LLC

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:

## Sean Altshuler

Name of Person

## Our Love Will Turn You On, LLC

Firm/Company

3630 N. 53rd Ave.

Address

Hollywood, FL 33021

City/State and Zip Code

sean@time-peace.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

# Alan Koslow

at (954) 987-7550

Area Code & Daytime Telephone Number

Name of Person

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### OUR LOVE WILL TURN YOU ON, 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 Liabili	ity Company were filed on 2/11/2009	and accepted
Florida document number L09000014205		assissed assissed File AR 18
This amendment is submitted to amend the following	g:	PH CO
A. If amending name, enter the new name of the	limited liability company here:	STATE BRATIONS 2: 00
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET AI	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
B. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
<u> </u>	, Flor	
	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 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> Fitle</u>	<u>Name</u>	Address	Type of Action
MGRM	Sean Altshuler	11801 NW 2nd St.	Add
		Plantation, FL 33325	Remove
			<u>.</u>
<del> </del>			Add
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<del></del>			Add
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			Add
			Remove

D. If amending any other infort	nation, enter change(s) here: (Attach additional sheets, if necessary.)
March 13	2013
	Signature of a member or authorized representative of a member
Sean Altshule	er C
	Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00

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DIVISION OF CORPORATIONS

12 MAP I R PM 1:59