

# Florida Department of State

Division of Corporations Public Access System

### Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090000480113)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (050)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600 Phone

: (323)962-3889 Fax Number

# AMND/RESTATE/CORRECT OR M/MG RESIGN

#### EIGHTY EIGHT ASSOCIATES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

### **COVER LETTER**

TO: Registration Division of C			
SUBJECT: EIGHT	Y EIGHT ASSOCIATES		
	(Name of Lii	mited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
	Francyne Carrillo		
		(Name of Person)	
	Legalzoom.com, Ind	<b>3</b> .	
•		(Firm/Compañy)	
	7083 Hollywood Bly		OS TALL
		(Address)	AR H
	Los Angeles, CA 9	0028	MAR-2 RETARY AHASSE
		(City/State and Zip Code)	
For further information	concerning this matter, please	cail:	OF STA
Francyne Carrillo		at ( 323 ) 962-8600	32 10A
	e of Person)	(Area Code & Daytime	Tetephone Number)
Partared in a shoot for	she following an area		
Enclosed is a check for		There are the state of	Control of the contro
<b>√</b> \$25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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, PL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited (A	Liability Company as it now appears on our records.)  Florida Limited Liability Company)		
The Articles of Organization for this Limited Li	iability Company were filed on 02/13/2009	and assign	red
Florida document number <u>L09000014754</u>			
This amendment is submitted to amend the follo	owing:		
		A Section	>
A. If amending name, enter the new name of	the limited liability company here:	ればい	9
Williams Frm - Fast Response Mainter		HATT	<u> </u>
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company," the designation "	LLC SETTE abb	revialion
		F Q <b>≥</b>	سير أ
10 Ifdi theinterest exemt and/o	to estimate office address on our respects water	L'S	
registered agent and/or the new registered of	or registered office address on our records, <u>enter</u> <u>fice address here</u> :	£ ω	HE SHEW
	<del></del>	≥m ~	
		•	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street ad	ldress)	
	, Florida		
	(City)	(Zip Code)	

#### New Registered Agent's Signature, if changing Registered Agent:

**EIGHTY EIGHT ASSOCIATES LLC** 

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>	Name	Address	Type of Action	
<del></del>			Add Remove	
			Kemove	
		,	Add	
		·	Add Remove	
		· · · · · · · · · · · · · · · · · · ·		
			Add Remove	
			Add	
			Add Remove	
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if necessa		
			 Z.	
			O9 MAR	
			AR-2	
		· · · · · · · · · · · · · · · · · · ·		
Dated	-11V	 <u></u>	M 8: 32	
,		nber or authorized representative of a member		
e	John Williams, Member Ty	ped or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00