

LD9000016709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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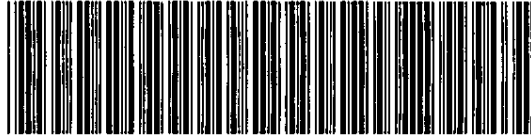
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

FEB 17 2016

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AEGIS STRATEGIC DEVELOPMENT, 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:

Mark LaGatta

Name of Person

Aegis strategic development, LLC

Firm/Company

1425 Chapman Circle

Address

Winter Park, FL 32789

City/State and Zip Code

doctorlagatta@gmail.com

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

For further information concerning this matter, please call:

Mark LaGatta

Name of Person

at (407)

Area Code

694 96 90

Daytime Telephone Number

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**

Aegis Strategic Development, 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 Liability Company were filed on 02/18/2009 and assigned Florida document number LO 9000016709.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

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 605, 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


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TALLAHASSEE
FLORIDA

MGR = Manager
AMBR = Authorized Member

MGR MARK LABITTA 1425 Chapman Circle Wp FL 32709 ☒ Add

↳ (change to managing member)

 Add

☐ Remove Change

AMBR MARIA LAGUTTA

425 Chapman Circle, w/ FL 32789 ☐ Add

↪ (change to authorized member)

☐ Remove

☒ Change

☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 2/10/2016

2/10/2016

Signature of a member or authorized representative of a member

Mark LaBatta / Maria G. LaBatta

Typed or printed name of signee

SECRETARY OF THE MASS. BAR ASSOCIATION
FEB 10 2016

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