## 10900016843

(Requestor's Name) (Address)		
(Address)	100157268201	
(City/State/Zip/Phone #)	06/25/0901009005 **25.00	
PICK-UP WAIT MAIL		
(Business Entity Name)	Agricultura i i decenti i il discontine di decentina di d	
(Document Number)	Ž.	
Certified Copies Certificates of Status	O9 JUL 10 SECRETARY LLAHASSE	
Special Instructions to Filing Officer:	PH 3: 58 PH 3: 58	
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Office Úse Only

D. BRUCE
JUL 10 2009
EXAMINER

## **COVER LETTER**

TO: Registration S  Property Division of Co	ection **. rporations	٠		ر ادا تبیغ
SUBJECT:		Fiorida LLC ed Liability Company		
	Name of Limit	ed Liability Company		
The enclosed Articles of	f Amendment and fee(s) are subr	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Phil Peachey		
		Name of Person		
	į	Buying Florida LLC		
		Firm/Company		-
		6245 Cartmel Lane		- <u>P</u>
		Address		FILED  09 JUL 10 PH 3: 58  SECRETARY OF STATE  CLAHASSEE, FLORID,
	Win	dermere Florida 34786 City/State and Zip Code		II.
	chi			FILE JUL 10 PH HASSEE, FI
	1 -mail addres : (te	lebuyingflorida.com_ be used for ruture annual report noti	fication)	O PH 3: 58 SEE, FLORIDA
For further information	concerning this matter, please ca	di:		A CO
	Phil Peachey	at ( 407 )	455 0222	
Name	of Person	Area Code & Daytii	ne Telephone Numb	er
Enclosed is a check for	the following amount:			
S25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy	S60,00 F	iling I ce. ate of Status &
		(additional copy is enclose		ed Copy onal 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



June 26, 2009

PHIL PEACHEY 6245 CARTMEL LANE WINDERMERE, FL 34786

SUBJECT: BUYING FLORIDA LLC

Ref. Number: L09000016843

We have received your document for BUYING FLORIDA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 609A00021998



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Buying Fl	orida LLC		<del>.</del>
( <u>Na</u>	me of the Limited Liability Comp. (A Florida Limited	niv as it now appears Liability Company)	on our records.)	
he Articles of Organization	for this Limited Liability Compan	y were filed on	02/19/2009	_ and assigned
lorida document number	L09000016843			
his amendment is submitted	to amend the following:			
. If amending name, enter	the new name of the limited lia	bility company here	:	
he new name must be distingu L.L.C."	ishable and end with the words "Lim	nited Liability Compan	y," the designation "LL	C" or the abbreviat
nter new principal offices	address, if applicable:			
Principal office address MU	ST BE A STREET ADDRESS			09 <u> </u>
			SSEE	< -
nter new mailing address,	if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		-		<u>မှ ၂</u>
		<del> </del>	10A	86
If amending the regist	ered agent and/or registered o	office address on o	ir records enter the	e name of the
	new registered office address he		i records, enter the	manic of the
Name of New Regis	tered Agent:			
New Registered Off	ice Address:	•		
		Ente	er Florida street addre	ess
			, Florida	
		Citv		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 = M	MGRM = Managing Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGRM_	Phil Peachey	6245 Cartmel Lane	✓ Add ☐ Remove	
		Windermere FL 34786	Kemove	
			Add Remove	
			Add Remove	
,				
			Add Remove	
			<del></del>	
			Add Remove	
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			Remove	
D. If amend	ling any other information, en	ter change(s) here: (Attach additional sheets, if neces	sary.)	
			05 05 05	
<del></del>		-	LLAHASS	
			E P	
			PH D FS SAFE CORPER SO	
Dated	08/09/09		2 œ	
	Signature o	f a member or authorized representative of a member		
	Pto	Typed or printed name of signee		
		· · · · · · · · · · · · · · · · · · ·		

Page 2 of 2

Filing Fee: \$25.00