

LD90000016996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

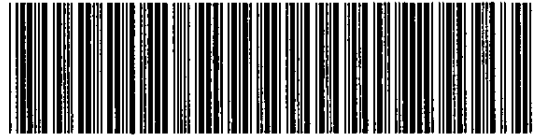
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07/31/12--01008--012 **25.00

FILED
12 JUL 30 PM 5:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 24, 2012

Via U.S. Certified Mail
Return Receipt Requested
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Regarding: Amended Articles of Organization of a Florida Limited Liability
Company, 10of9 Management

To Whom It May Concern,

Enclosed please find documents and fees related to the amendment of 10of9
Management's Articles of Organization. If you have any further inquiries regarding this
matter, please do not hesitate to contact me by telephone at (866) 229-8717 or by mail at
1969 South Alafaya Trail, No. 250, Orlando, FL 32828. Thank you for your attention to
this matter.

Very truly yours,



Carmen Casado

Enclosures:
Amended Articles of Organization and corresponding filing fee
Member Disassociation and Withdraw Agreement

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 10of9 Management 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:

Carmen Casado

Name of Person

10of9 Management LLC

Firm/Company

1969 South Alafaya Trail, No. 250

Address

Orlando, FL 32828

City/State and Zip Code

info@10of9management.com

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

For further information concerning this matter, please call:

carmen casado

Name of Person

at (**866**)

229-8717

Area Code & 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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

10of9 Management 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 02/16/2009 (effective) and assigned Florida document number L09000016996.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 1969 South Alafaya Trail No. 250
(Principal office address MUST BE A STREET ADDRESS) Orlando, FL 32828

Enter new mailing address, if applicable: same as above
(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: no change

New Registered Office Address: 1969 South Alafaya Trail No. 250
Enter Florida street address
Orlando, Florida 32828
City Zip Code

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TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
MGR	Kevin W. Jones	789 Skyridge Rd. Clermont, FL 34711	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 07/17 2012



Signature of a member or authorized representative of a member

Carmen Casado

Typed or printed name of signee