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Special Instructions to Filing Officer:

A. LUNT

OCT 30 2009

EXAMINER

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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJEC	RARY GROUP, LLC					
SOBOL	Name of Limited Liability Company					
The encl	sed Articles of Amendment and fee(s) are submitted fo	or filing.				
Please re	urn all correspondence concerning this matter to the fo	llowing:				
		BROWN CPA CVA				
	Na	me of Person				
	KLBROWN A	TAMPA PALMS TAMPA PALMS TAMPA PALMS				
	Fir	m/Company SS 29				
	15255 AN	MBERLY DRIVE				
		Address CRIDE 1: 49				
	TAMPA	FL 33647-2155				
		ate and Zip Code				
	KEN@KL	BROWN.COM				
For furth	r information concerning this matter, please call:	for future annual report notification)				
	KEN BROWN	010 079 1040				
	Name of Person	Area Code & Daytime Telephone Number				
Enclosed	is a check for the following amount:					
\$25.0	Certificate of Status C	\$60.00 Filing Fee, ertified Copy dditional 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

FLORIDA CONTEMPORARY GROUP, 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	ty Company were filed on FEBR	UARY 23, 2009 and assigned		
Florida document number L09000018269	.	,		
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liability company here:			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	the designation "LEC" or the abbreviation		
Enter new principal offices address, if applicable	<u> </u>			
(Principal office address MUST BE A STREET AL	DDRESS)	29 29 \$3		
	· · · · · · · · · · · · · · · · · · ·	mç v iti		
		CC. Street, St		
Enter new mailing address, if applicable:		ORID F.		
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	30		
				
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
_	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 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> Type of Action **MGRM** KENNETH L BROWN 15255 AMBERLY DRIVE ☐ Add TAMPA, FL 33647-2155 ✓ Remove **AARON BARCELLONA** MGRM 6832 DUNCASTER ST ✓ Add WINDERMERE, FL 34786 Remove MGRM JASON VIRMILYA 12930 DROXFORD ROAD ✓ Add WINDERMERE FL 34786 Remove A 50 _Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 19 2009 Dated Signature of a member or authorized representative of a member KENNETH L BROWN Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00