

L09000018836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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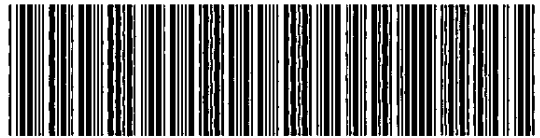
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

G. HARVEY

OCT 14 2009

EXAMINER

# McDowell, Rice, Smith & Buchanan

A PROFESSIONAL CORPORATION

RALPH W. SHAW  
DIRECT DIAL: 816/960-7319  
E-MAIL: [RSHAW@MCDOWELLRICE.COM](mailto:RSHAW@MCDOWELLRICE.COM)

ATTORNEYS AT LAW  
SKELLY BUILDING  
SUITE 350  
605 WEST 47TH STREET  
KANSAS CITY, MISSOURI 64112-1905  
(816) 753-5400 FAX (816) 753-9996

October 7, 2009

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

*In re:* Artbru Partners II, LLC / Corporate Representation  
MRS&B File No. 12958.000

Ladies / Gentlemen:

In connection with the above-referenced matter, please find enclosed the following:

1. Original and copy of Cover Letter;
2. Original and copy of Articles of Amendment to Articles of Organization of Artbru Partners II, LLC;
3. Our firm check in the amount of \$25.00 in payment of the filing fee; and
4. Self-addressed, return envelope.

Please file the Articles of Amendment as soon as possible and return a file-stamped copy in the enclosed return envelope. If you have any questions or require any additional information, please feel free to call. Thank you.

Very truly yours,

**McDowell, Rice, Smith & Buchanan**  
*a professional corporation*

*Ralph W. Shaw*

Ralph W. Shaw  
Paralegal

RWS: / Enclosures

cc: Ronald S. Bronstein  
Bruce Reisman

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ARTBRU PARTNERS II, 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:

**RONALD S. BRONSTEIN, ESQ.**

Name of Person

**MCDOWELL, RICE, SMITH & BUCHANAN, P.C.**

Firm/Company

**605 WEST 47TH STREET, SUITE 350**

Address

**KANSAS CITY, MO**

City/State and Zip Code

**rshaw@mcdowellrice.com**

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

For further information concerning this matter, please call:

**RALPH W. SHAW, PARALEGAL**

Name of Person

at ( 816 )

**753-5400**

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

**ARTBRU PARTNERS II, 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 FEB. 24, 2009 and assigned Florida document number L09000018836.

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:

(Principal office address MUST BE A STREET ADDRESS)

15207 FONTANA STREET

LEAWOOD, KS 66209

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15207 FONTANA STREET

LEAWOOD, KS 66209

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TALLAHASSEE, FLORIDA

**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*

, 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>	<u>Type of Action</u>
MGR	ARTHUR LIEBENTHAL	5012 WEST 128TH STREET LEAWOOD, KS 66209	<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.)

CHANGE OF ADDRESS OF REMAINING MANAGER:

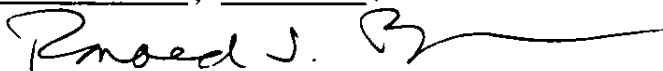
BRUCE RIESMAN

15207 FONTANA STREET

LEAWOOD, KS 66209

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 TALLAHASSEE, FLORIDA

Dated OCTOBER 6, 2009



Signature of a member or authorized representative of a member

RONALD S. BRONSTEIN, ESQ.

Typed or printed name of signee