## L09000027254

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Certified Copies	_ Certificates	of Status
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DIVISION OF CORPORATIONS

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T. HAMPTON

AUG = 5 2010

EXAMINER

## COVER LETTER

TO: Registration Section Division of Corporations						
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SUBJECT:	X2K H	movi			,	
	Name of Limited Li	ability.Company				
			\$			
The enclosed Articles of Amendmen	t and fee(s) are submitted	for filing.	*. • • ·	r		
Please return all correspondence con	cerning this matter to the	following:				
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Manager State Control of the Control	- AMS	Name of Person			•	
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For further information concerning t	his matter, please call:		•			
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Name of Person		Area Code	e & Daytime Telep	none Number	**	
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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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 AUG -4 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 23, 2010

LUIS SALAZAR 2593 N ORANGE BLOSSOM TRAIL KISSIMMEE, FL 34744

SUBJECT: L&R ARMORY LLC Ref. Number: L09000027254

We have received your document for L&R ARMORY LLC and your check(s) totaling \$30.00. 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) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 510A00017903

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LER	Armoru L	.2.C.	• •	<b>ت</b>	
(Name of the Limited		any as it now appears of Liability Company)	n our records.)	NVIS	
The Author Course to the Court of the		ci i so à	lasilisas	AUG	
The Articles of Organization for this Limited L	• •	y were filed on	120   2009	and assigned _	<u></u>
Florida document number <u>L0900002</u>	7254.	-	•		- -
•				PR RPS	_,
This amendment is submitted to amend the foll	owing:			STATE RATIO	
A. If amending name, enter the new name o	f the limited lia	bility company here:	•	SK C	
				en e	
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	nited Liability Company	" the designation "L	LC" or the abbrevia	tion
Enter new principal offices address, if applic	:able:				<u> </u>
(Principal office address MUST BE A STREE	TADDRESS)	2593	V Drange	Blossom 1	لنمة
•		Krss) where	FC 34	744	_
		,			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	BOX)	2593 N	Orange Bl		(I
	<del></del>	Kartmer	F 347	44	LL-C
		10000 Liverit		<del>- L(</del>	-
B. If amending the registered agent and/	or registered o	ffice address on our	records, enter t	he name of the :	new
registered agent and/or the new registered o					
Name of New Registered Agent:			1.		
				,	_
New Registered Office Address:	é		577 · 2 21		_
	- 1 - A	Enter	Florida street addi	ress	<u>:</u>
	<u> </u>		, Florida	. <u> </u>	
		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.

IGR = Ma		,					•
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Filing Fee: \$25.00