# LD9000039229

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**EXAMINER** 



200180177882

05/17/10--01021--009 \*\*25.00

SECRETARY OF STATE

## **COVER LETTER**

rations				
MICHAEL	DOLEZAL, LLC			
Name of Limited Liability Company				
nendment and fee(s) are sub	omitted for filing.			
ence concerning this matter	to the following:			
<u>.                                    </u>	<del>,</del>			
	Name of Person			
	Firm/Company			
6218 N. 9TH AVENUE				
	Address			
PENSACOLA, FL 32504				
City/State and Zip Code				
mikesparadise@cox.net				
	•			
	at (_850 )	255-5618		
erson	Area Code & Day	lime Telephone Number		
following amount:	:			
\$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)		
	MICHAEL Name of Limit nendment and fee(s) are subsence concerning this matter  Femail address: (cerning this matter, please of the cerning this matter, please of the cerning this matter.)  Following amount:  \$30.00 Filing Fee &	MICHAEL DOLEZAL, LLC  Name of Limited Liability Company  mendment and fee(s) are submitted for filing.  ence concerning this matter to the following:  MICHAEL DOLEZAL  Name of Person  Firm/Company  6218 N. 9TH AVENUE  Address  PENSACOLA, FL 32504  City/State and Zip Code  mikesparadise@cox.net  E-mail address: (to be used for future annual report not cerning this matter, please call:  EL DOLEZAL  at (850)  Area Code & Daylor Collowing amount:  S30.00 Filing Fee & \$55.00 Filing Fee &		

### **MAILING ADDRESS:**

TO:

**Registration Section** 

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

MICHAEL DO	LEZAL, LLC	
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appea	rs on our records.)
(A Forda Ellinga El	additity Company)	
The Articles of Organization for this Limited Liability Company	were filed on	APRIL 23, 2009 and assigned
Florida document numberL0900039229		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company he	<u>re</u> :
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Comp	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, enter the name of the new
registered agent and/or the new registered office address nere	;	
Name of New Registered Agent:		
Name of New Registered Agent.	<u> </u>	TAS T
New Registered Office Address:		
	Ei	nter Florida street address
		, Florida 2
	City	mo Zip Code
New Registered Agent's Signature, if changing Registered Agent:		SI : O

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 = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	JoANNE DOLEZAL	6218 N. 9TH AVENUE PENSACOLA, FLORIDA 3250	Add 4 Remove
	<u> </u>		Add Remove
			Add Remove
			Add . Remove
			Add Remove
			AddRemove
		enter change(s) here: (Attach additional sheets, if ne	
	JOANNE DOLEZAL IS BE FOR PURPOSE OF DIST	ING ADDED AS 90 PERCENT OWNER OF RIBUTION OF PROFITS	THIS LLC
			10 MA
Dated	MARCH 11 Signature	2010  Mehall Mall  e of a member or authorized representative of a member	Y 17 PH
		MICHAEL DOLEZAL  Typed or printed name of signee	STATE STATE

Page 2 of 2

Filing Fee: \$25.00