

LO9 000039415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

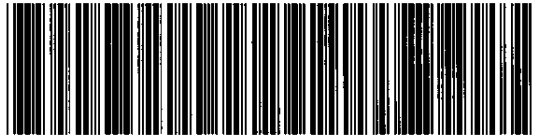
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100155741051

05/11/09--01019--002 **25.00

2009 MAY 11 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

MAY 12 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PRECISION GROWTH FUND I, 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:

William S. Scott

(Name of Person)

Precision Capital Management, LLC

(Firm/Company)

36 NW 6th Ave, Suite 409

(Address)

Miami, FL 33128

(City/State and Zip Code)

For further information concerning this matter, please call:

William S. Scott

(Name of Person)

at (305) 796-3176

(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

2009 MAY 11 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

PRECISION GROWTH FUND I, 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 April 23, 2009 and assigned
Florida document number L09000039415

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
2009 MAY 11 AM 11:20
SECRETARY OF STATE
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:**

<u>Name of New Registered Agent:</u>	<u>The Scott Law Firm, P.A.</u>
<u>New Registered Office Address:</u>	<u>36 NW 6th Ave, Suite 409</u>
	(Enter Florida street address)
	<u>Miami</u> , <u>Florida</u> <u>33128</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.

The Scott Law Firm, P.A.
By [Signature] Principal
(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>
MGRM	William S Scott	36 NW 6th Ave, Suite 409 Miami, FL 33128	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Precision Capital Management, LLC	36 NW 6th Ave, Suite 409 Miami, FL 33128	<input checked="" 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

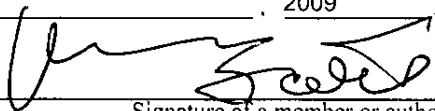
2009 MAY 11 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

Dated April 29

2009



Signature of a member or authorized representative of a member

William S. Scott

Principal

Typed or printed name of signee

Precision
Capital
Management
LLC

Page 2 of 2

Filing Fee: \$25.00