609000041084

(Requestor's Name)				
(Address)				
(Ad	ldress)			
	·			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
, i	·	·		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
•				

Office Use Only



500171976205

03/17/10--01033--017 **30.00

SECRETARY OF STATE TALLAHASSEE. FLORIDA

2010 MAR 17 AM 11: 09

T. CLINE

MAR 18 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Name of Limited Liability Company					
The end	closed Articles of Amendment and fee(s) are submitted for filing.					
Please	return all correspondence concerning this matter to the following:					
	DJ Delgado Name of Person Bosus Properties Firm/Company					
	7618 MATHER ROLN TALLAR Address LAKELAND, FL 33810 SSRY City/State and Zip Code					
For further information concerning this matter, please call:						
	Dolgado at (863) 258-8288 Area Code & Daytime Telephone Number					
Enclose	ed is a check for the following amount:					
\$25 .	Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 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

Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>LO90004108</u>	were filed on <u>8-21-0</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
Bosun Properties The new name must be distinguishable and end with the words "Limi		n "LLC" or the abbreviation
"L.L.C."	ted Liability Company, the designation	Fig. 2
Enter new principal offices address, if applicable:	5206 US High	hus 298 A
(Principal office address MUST BE A STREET ADDRESS)	LAKELAND, FC	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7 AM II: 09 STE, FLORIDA
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street o	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

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ D
	 		
· · · · · · · · · · · · · · · · · · ·			Damova
			- Primer 170 Ton
			ARY OF SEE, G
D. Ifamen	ding any other information, enter cha	nge(s) here: (Attach additional sheet.	ATE RIDA
 Dated			
<u></u>	<u> </u>	Pelczado	
		ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00