

Division of Corporations

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# LD9000041207

Florida Department of State  
Division of Corporations  
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## FISHER COMMODITIES LLC

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JUN 24 2009

EXAMINER

## FAX COVER SHEET

TO

COMPANY

FAX NUMBER 18506176383

FROM Tony Burroughs

DATE 2009-06-23 19:25:57 GMT

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## COVER MESSAGE

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From: BizCopier1@legalzoom.com [BizCopier1@legalzoom.com]

Sent: Tuesday, June 23, 2009 2:08 PM

To: Tony Burroughs

Subject:

This document was digitally sent to you using an HP Digital Sending device.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FISHER COMMODITIES 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:

Tony Burroughs  
(Name of Person)

Legalzoom.com, Inc.  
(Firm/Company)

7083 Hollywood Blvd., Suite 180  
(Address)

Los Angeles, CA 90028  
(City/State and Zip Code)

For further information concerning this matter, please call:

Tony Burroughs at ( 323 ) 962-8600  
(Name of Person) (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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SECRETARY OF  
DIVISION OF TREASURY

09 JUN 23 AM 4:51

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

FISHER COMMODITIES 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 04/29/2009 and assigned  
Florida document number: L09000041207.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ROMAN FISHER COMMODITIES LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

Title	Name	Address	Type of Action
MGRM	THOMAS BENJAMIN FISHER GIFT TRUST	3100 N. OCEAN BLVD., APT. 806 FORT LAUDERDALE FL 33308	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Roman Fisher	3100 N. OCEAN BLVD., APT. 806 FORT LAUDERDALE FL 33308	<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

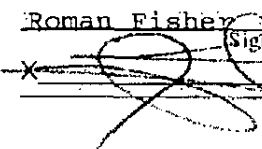
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated June 19, 2009

Roman Fisher

Signature of a member or authorized representative of a member

X  signing on behalf of THOMAS BENJAMIN FISHER GIFT TRUST, Member  
Typed or printed name of signee

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Filing Fee: \$25.00