## LD9000b1500

(Requestor's Name)  (Address)	400158341184	
(City/State/Zip/Phone #)		
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(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:

L. SELLERS

JUL 18 2009

**EXAMINER** 

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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Life Oasis For Children 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:				
Steven Clark Name of Person				
Life Oasis For Children LLC Firm/Company				
1793 W. Hillsborough ave.				
Tampa FL, 33603 City/State and Zip Code				
Life Oasis 4@ Yahoo. Com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Steven Clark at (813) 516 - 2575  Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ Certificate of Status \$\ Certificate of Status \$\ Certified Copy (additional copy is enclosed) \$\ (additional copy is enclosed)\$\$ \$\ (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

The Articles of Organization for this Limited Liability Company were filed on 6-24Florida document number L0900061500 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) 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: Hillshorous New Registered Office Address: Enter Florida street address , Florida <u>33</u>6

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 Rehistered 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>	Type of Action
NGRM	Steven Clark	1793 W. Hillsborough ave Tampa FL 33608	Add Remove
			Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
<del></del>			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
Ste	ven Clark 50% Owner o	F Life Dasis For Children	LLC.
	•	of Life Oasis For Childre	
_	nma Mamfelva		
Dated	7/9/09 Darren	* Ywa	F JUL 90 JUL
	Warren K. Gold	or authorized representative of a member	SS. E
	Туред	or printed name of signee	MIO: 28
	ET:	Page 2 of 2	28 40A