## L0900063294

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**EXAMINER** 



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SECRETARY OF STATE DIVISION OF CORPORATION

## **COVER LETTER**

TO: Registration Secti Division of Corpo									
SUBJECT: Loyalook									
SUBJECT: LOYATOUR	Name of Limited Liability Company								
	nendment and fee(s) are submitted for filing. ence concerning this matter to the following:								
	Tim D. Henkel, Esq.								
Name of Person									
Silver, Garvett & Henkel, P.A.									
Firm/Company									
	18001 Old Cutler Road, Suite 600								
Address									
	Palmetto Bay, FL 33157								
City/State and Zip Code									
tdh@sghpa.com.									
•	E-mail address: (to be used for future annual report notification)								
For further information cond	cerning this matter, please call:								
Tim Henkel Name of Pe	at ( <u>305</u> ) <u>377-8802</u> erson Area Code & Daytime Telephone Number								
Enclosed is a check for the t	following amount:								
\$25.00 Filing Fee [	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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

Loyalook, LLC								
(Name of the Limited I (A)	iability Compan Iorida Limited L	y as it now a iability Comp	ppears any)	on our reco	rds.)			
The Articles of Organization for this Limited Lia Florida document number <u>L09000063294</u>	bility Company	were filed on	06/3	30/2009		and assig	gned	
This amendment is submitted to amend the follow	wing:							
A. If amending name, enter the new name of	the limited liabi	lity compan	<u>y here</u> :	:				
			<u>-</u>					
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ed Liability C	ompany	y," the desig	nation "LLC	or the at	obreviatio	n
Enter new principal offices address, if applica	1008 Jefferson Avenue, No. 301							
(Principal office address MUST BE A STREET	Miami E	leach	, FL 331	39	99 S	DIVISION SECR		
Enter new mailing address, if applicable:	1009 Jefferson Avenue, No. 301 2							
(Mailing address MAY BE A POST OFFICE B	<u>Miami P</u>	each	FL 331	39		20°	20 0	
B. If amending the registered agent and/or the new registered off			on ou	r records,	enter the	name of	2 TE	тат. <u>w</u>
Name of New Registered Agent:	Tim D. He	nkel						
New Registered Office Address:	18001 Old	Cutler R			00, Palme		ay, FL	3315
			_,,,,,					
	<del> </del>	, Florida City Zip Code						
Nam Basistanad Amantha Signatura if shanging Ba	alatomod A ac4-	•				-		

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 **Type of Action** Title **Address** <u>Name</u> 2051 NW 112 Ave., Suite 122 MGRM Giginapatrizia Lombardi ☐ Add Remove Miami, FL 33172 2051 NW 112 Ave., Suite 122 MGRM Fabio Ciraulo Miami, FL 33172 XX Remove **DDAXIX** 1008 Jefferson Avenue, No. 301 MGRM J<u>acob Hoekstra</u> Miami Beach, FL 33139 Remove MGRM Cristina Spagna 1008 Jefferson Avenue, No. 301 Miami Beach, FL 33139 Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated August 30 2009 Signature of a member or authorized representative of a member

Tim.D. Henkel, attorney for Loyalook and Mr. Hoekstra and Ms. Spagna
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00