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(Address)
·
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SECRETARY OF STATE

D. BRUCE
AUG 1 0 2009
EXAMINER

COVER LETTER

TO: '

Registration Section
Division of Corporations

Tallahassee, FL 32314 -

SUBJECT:	Restoring America Now LLC				
	Name of Limi	ited Liability Company			
The enclosed Ar	icles of Amendment and fee(s) are sub	omitted for filing.			
Please return all	correspondence concerning this matter	to the following:			
		Gary M. Danno			
	Name of Person				
	Restoring America's Properties, LLC Firm/Company				
		11311 Virginia Drive			
		Address			
	Во	09			
	City/State and Zip Code greatcomm1@yahoo.com				
		to be used for future annual report notification	SSEE SSEE		
For further infor	mation concerning this matter, please of	call:	To Be In		
	Gary M. Danno	ai(O9 AUG -7 PM 2:37 SECRETARY OF STATE ALLAHASSEE. FLORIDGE 12520 Phone Number		
	Name of Person	Area Code & Daytime Tele	phone Number		
Enclosed is a che	cck 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	STREET/COURIER A Registration Section Division of Corporation Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Re	storing Ame	rica Now, LL	<u> </u>	·
(Name of the Limite	A Florida Limited I	i ny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited I Florida document numberL0900006		were filed on	07-01-2009	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name o</u>	of the limited liab	oility company her	<u>:e</u> :	
RESTORI	NG AMERICA'	S PROPERTIE	S, LLC	
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compa	iny," the designation '	'LLC" or the abbreviation
Enter new principal offices address, if applicable:		11311 Virgini	a Drive	
(Principal office address MUST BE A STRE	ET ADDRESS)	Bonita spring	s, FL 34135	SE S
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11311 Virginia Bonita Spring	· · · · · · · · · · · · · · · · · · ·	FILED UG-7 PM 2:37 TARY OF STATE
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Gary M. Da	nno		
New Registered Office Address:	11311 Virgi	nia Drive		
-		En	ter Florida street ad	dress
	Во	nita Springs	, Florida	34135
		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

Page 1 of 2

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 = I	Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
	****		Add
			Remove
			Add Remove
			Add
			Remove
·			Add
		<u> </u>	
	·		NAdd Remove
D. If amen	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessar	O9 AUG
			PILE 09 AUG -7 PM SECRETARY OF ALLAHASSEE. FI
			P R C
	·····		D 2:37 SIATE ORIDA
_			
Dated	August 4th	Mh auro	
	Signature of a me	ember or authorized representative of a member	
	, Gigilative of a me	Gary M. Danno	
		'yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00