## L09000065235

(R	equestor's Name)	
	-	
(A	ddress)	·
- (Δ.	ddress)	
(~)	uuiess, .	
		•
(C	ity/State/Zip/Phone	#)
	_	
PICK-UP	WAIT	MAIL
(B)	usiness Entity Nam	۵)
	domess Emily Ham	<b>.</b> ,
(D	ocument Number)	
Certified Copies	Certificates	of Status
•		
Special Instructions to	Filing Officer:	,
		`

Office Use Only



900181030119

05/19/10--01018--009 \*\*25.00

2010 HAY 19 PH 20 12 SECRETARY OF STATE

C. LEWIS

MAY 2 0 2010

EXAMINER

## **COVER LETTER**

TO: Registration Se Division of Cor	ction porations		
SUBJECT:	No	rhay, LLC	
SUBJECT:		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	C	ecilia Japas de Gooch	
		Norhay, LLC	
		Firm/Company	
		118 Pinedale Road  Address	
		DeBary, FL 32713	
		City/State and Zip Code	
	E-mail address: (	nary etaxes 4u. net to be used for future annual reports	notification)
For further information c	oncerning this matter, please o	eall:	
	Reynolds, EA		775-4277 ytime Telephone Number
	i r cison	Med code a Da	yumo rotopione vantos
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registi Divisio	ING ADDRESS: ration Section on of Corporations	Registration S Division of Co	orporations
P.O. B	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2010 MAY 19 PM 2: 12

	Norhay, LLC  bility Company as it now appears  orida Limited Liability Company)	SECRETARY TALLAHASSE	OF STATE E,FLORIDA
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears rida Limited Liability Company)	on out Técords.)	
The Articles of Organization for this Limited Liabil  Florida document number L0900006523	lity Company were filed on	07/06/09	and assigned
This amendment is submitted to amend the following.  A. If amending name, enter the new name of the		:	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company	y," the designation "LI	LC" or the abbreviation
Enter new principal offices address, if applicable	e: Na		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		r records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:	Ente	r Florida street addr	ess
_		, 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** Japas, Daniel 118 Pinedale Road .□ Add DeBary\_FL 32713 √ Remove Japas de Gooch, Cecilia MGRM 118 Pinedale Road DeBary FL 32713 Remove MGRM Gooch, Ricardo 118 Pinedale Road ✓ Add DeBary, FL 32713 ☐ Remove Remove  $\square$ Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) please update our Federal Identification to: 27-2530614 May 10 2010 Dated \_\_\_\_ Signature of a member or authorized representative of a member **Daniel Japas** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00