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(Re	questor's Name)	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE

AUG 0 4 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 23, 2009

PEDRIN A. VALBUENA 17401 NW 85 AVE MIAMI, FL 33015

SUBJECT: UNIQUE FURNITURE & GAZEBOS BAMBOO "LLC"

Ref. Number: L09000068780

09 AUG - 3 PM 2: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for UNIQUE FURNITURE & GAZEBOS BAMBOO "LLC" and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 709A00025346

COVERLETTER Debra	Bruce
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_ , , , , , , , <u> </u>
TO: Registration Section Division of Corporations
SUBJECT: Unique Furniture & Bamboo Cygzebo "LLC" Name of Limited Liability Company
Hadic of Bullian Blabsity Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pedrin A valouena
Name of Person
Zes o
Firm/Company A
ASS OF THE PARTY O
239 nelbon koad N go & F
Address
Cape coral FL 33993 City/State and Zip Code
City/State and Zip Code
Uniq turniture @ Aol. Com E-mail address: (to be used for future annual report notification)
- m v, v, v · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call:
Ped rin A Valloueng #305 879-5485
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Taliahassec, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tailahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited Liabi	lity Company)
The Articles of Organization for this Limited Liability Company we Florida document number LOGOOG 68780	e filed on July 16, 2009 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabilit</u> y	company here:
Unique Furniture & Bambe The new name must be distinguishable and end with the words "Limited Inc.C."	iability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	7401 NW 85 Ave
^ * * * * * * * * * * * * * * * * * * *	halean FL 33015
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office	P.O. BOX 152926 Tape coral FL 38915 address on our records, enter the name of the new
egistered agent and/or the new registered office address here:	
Name of New Registered Agent:	O9 A
New Registered Office Address:	ASS ST
	Enter Florida street addr 🛱 💆 😮
	Florida 79 3 1
C	Ty Code
New Registered Agent's Signature, if changing Registered Agent:	26 26 A
hereby accept the appointment as registered agent and agree to he provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as prov	performance of my duties, and I am familiar with and

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 = Mar MGRM = M	nager Ianaging Member		
Title	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			_ ~
			Add Remove
			Add Remove
			AddRemove
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessar	AUG -3
			PH 2:26
Dated	=		-
	PET	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00