

LORENZO LANEY

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

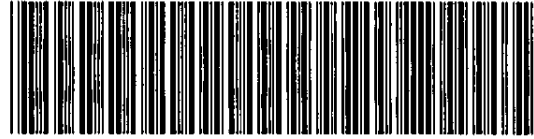
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SECRETARY OF STATE
INDIANAPOLIS, IN 46204-0001

MAR 27 2015
S. YOUNG

RECEIVED MAR 16 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 11, 2015

MS. MARY JUDITH MITCHELL
3340 PEACHTREE ROAD NE STE 1530
ATLANTA, GA 30326

SUBJECT: REGINA HOLDINGS, LLC
Ref. Number: L09000069454

We have received your document for REGINA HOLDINGS, 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):

Amendments to articles of organization of a Florida limited liability company must comply with section 605.0202, Florida Statutes. For your convenience, we are enclosing the appropriate form and instructions.

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) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 715A00004978

15 MAR 25 AM 10:09
DIVISION OF CORPORATIONS
INFORMATION SERVICES



Mary Judith Mitchell, Paralegal
mmitchell@ichterthomas.com

(404) 869-5246 direct dial
(404) 869-7610 direct fax

March 25, 2015

Via United Parcel Service

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE *Articles of Amendment to the Articles of Organization of Regina Holdings, LLC*

Dear Sir or Madam:

Pursuant to your correspondence of March 11th, a copy of which is enclosed, please find the original and copies of the Cover Letter and Articles of Amendment to the Articles of Organization of Regina Holdings, LLC for filing with your division.

Please file the original and return the copy stamped "filed" to my office in the enclosed, self-addressed, stamped envelope.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

Mary Judith Mitchell
Paralegal to Wm. Daniel Davis

Enclosures

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REGISTRY OF CORPORATIONS
TALLAHASSEE, FLORIDA

ORIGINAL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REGINA HOLDINGS, 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:

Mary Judith Roll-Mitchell
Name of Person

Ichter Kresky & Associates, LLC
Firm/Company

3340 Peachtree Road, Suite 1530
Address

Atlanta, Georgia 30326
City/State and Zip Code

mmitchell@IchterKresky.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Judith Roll-Mitchell at (404) 869-5246
Name of Person Area Code Daytime Telephone Number

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 REGISTRATION SECTION
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

Enclosed is a check 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
 Tallahassee, FL 32314

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

ORIGINAL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

REGINA HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on July 20, 2009 and assigned Florida document number L09000069454.

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)

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TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

Enter Florida street address

_____, 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Gaylinda L. Cuff	71 Gateside Place	<input type="checkbox"/> Add
		Marietta, GA 30067	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 25, 2015.



Signature of a member or authorized representative of a member

Danielle R. Cuff, Manager

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA