Division of Corporations Public Access System

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To:

Division of Corporations

Account Number : I19990000007

Fax Number

: (850)617-6383

JUL 24 2009

Account Name

: DAVID TORCHIN, C.P.A., P.AEXAMINER

Phone Fax Number : (954)472-3124 : (954)472-0067

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

grass.

LOVE AND ROLL.COM, LLC

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### ASSOC. CPA (THU) JUL 23 H 090001681453

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lov	/e and Roll.com, LLC	
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our recor a Limited Liability Company)	ds.)
The Articles of Organization for this Limited Liability	Company were filed on 07/20/09	and assigned
Florida document number L09000069659	<del></del> '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ad  Name of New Registered Agent:	istered office address on our records, s dress here:	enter the name of the new
New Registered Office Address:		23 E
New Registered Office Address:	(Enter Florida str	
	(City)	Z Code)
New Registered Agent's Signature if changing Register	ad Agants	•

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)

# H090001681453

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				
<u>Tttle</u>	Name	Address	Type of Action	
<u>MGR</u>	Livia Stelerisin	2501 S. Ocean Dr., PH # 5 Hollowood, FI 32019	RZJ Add	
			The section is	
	•		Add Remove	
			Add Remove	
	······································		<b>28 6</b>	
			Add Ressove	
D. K	amending any other information, so	ter change(s) here: (Attach additional sheets, if n	ecessary.)	
			TALL SECTION	
Deted	July 23.	2009	PILE 09 JUL 23 AF SECRETARY OF TALLAHASSEE	

Typod or printed name of signes

Page 2 of 2

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Attile Wellend