

LOG 000074414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

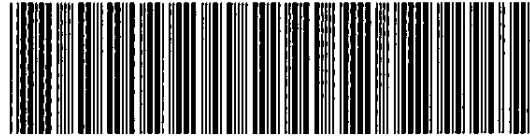
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

OCT 31 2011

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MyQ America, 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:

Mark C. Hanewich, Esq.

Name of Person

Tannenbaum Scro Hanewich & Alpert, P.L.

Firm/Company

1680 Fruitville Road - Suite 102

Address

Sarasota, FL 34236

City/State and Zip Code

mhanewich@tannenbaumscro.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Mark C. Hanewich

Name of Person

at ( 941 )

308-3155

Area Code & Daytime Telephone Number

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

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

MyQ America, 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 08/03/2009 and assigned  
Florida document number L09000074414.

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)

1680 Fruitville Road - Suite 102

Sarasota, Florida 34236

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1680 Fruitville Road - Suite 102

Sarasota, Florida 34236

**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:

Tannenbaum Scro Hanewich & Alpert, P.L.

New Registered Office Address:

1680 Fruitville Road - Suite 102

*Enter Florida street address*

Sarasota

, Florida

34236

*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.*

*[Signature]*  
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

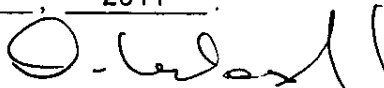
Filing Information: \_\_\_\_\_

FEI/EIN Number: 27-2044590 \_\_\_\_\_

Manager/Member Detail: \_\_\_\_\_

see attached sheet \_\_\_\_\_

Dated October 20, 2011



Signature of a member or authorized representative of a member

Ondrej Lutovsky, Managing Member

Typed or printed name of signee

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 PALM BEACH, FLORIDA

**Manager/Member Detail**  
**Name & Address**

Title MGRM

Martin Janus  
Kosmonoska 873/2  
Prague, CR 19700

Title MGRM

Jiri Hubeny  
Brezinova 842  
Dvur Kralove Nad Labem, CR 54402

Title MGRM

Ondrej Lutovsky  
Brezova Alej 1304  
Liberec, CR 46001

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