# L09000078768

(Re	equestor's Name)	
(Ad	dress)	,
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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(Bu	siness Entity Na	me) ,
(Do	ocument Number)	
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C. LEWIS

OCT 1 42009

EXAMINER

### **COVER LETTER**

TO:	Regiși Divisi	tration Section on of Corpor	on ations	44	ંત્ર	(æ	`	7	·t/		,	
4	.; •								4			
SUBJE	CB.	ž eži	<del>1</del> ,	Archai	nael R	ecord	s LLC					
50202	·•			Name of L								
The enc	losed A	articles of Am	endment and	l fee(s) are	submitte	d for filin	g.					
Please r	eturn al	ll corresponde	nce concern	ing this ma	itter to the	e followin	ıg:					
		_			Ke	evin Ale	xander					
						Name of l	Person					
		-				Firm/Con	npany					
		-			3575		Palm Ct			·····		
			•			Addre	ess					
		_		P			h, FL 330	069				
		,;	•		City	y/State and	Zip Code					
		_	E	el -mail addres	presid	ente@	bellsouth ure annual re	net port notific	cation)	<del></del>		
For furt	her info	ormation conc	erning this n	natter, plea	se call:							
		Kevin	Alexande	<u> </u>	······································	at (9	54) Area Code &		309-23 Telephon		·····	
								•				
Enclose	d is a cl	heck for the fo	ollowing am	ount:			٠					
\$25.	00 Filin	ng Fee	<b>]\$</b> 30.00 Fili Certifica	ng Fee & te of Statu		Certifie	iling Fee & ed Copy onal copy is	enclosed)		60.00 Fili Certificat Certified (addition	te of Stati Copy	us & s 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

Archangel Records LLC

FILED

2009 OCT 13 PM 1 55 SECRETARY OF STATE
TALLAHASSEE. FLORIDA

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on August 17, 2009 and assigned
Florida document number <u>L0900078768</u> .	
This amendment is submitted to amend the following:	•
A. If amending name, enter the new name of the limited liab	pility company here:
Archangel Mana	agement LLC
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	3575 Canary Palm Ct.
(Principal office address MUST BE A STREET ADDRESS)	Pompano Beach, FL 33069

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:

3575 Canary Palm Ct.

Pompano Beach, FL 33069

Name of New Registered Agent:  New Registered Office Address:	3575 Canary Palm Ct.			
	Enter Florida street address			
	Pompano Beach	, Florida	33069	
	City	<del></del>	Zip Code	

#### New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 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 = Ma MGRM = M	nager ' Ianaging Member	•	
Title '	Name	Address	Type of Action
MGRM	Kevin E Alexander	5221 NE 14th Terrace Fort Lauderdale, FL 33334	☐ Add ☐ ☐ Remove
MGRM	Kevin E Alexander	3575 Canary Palm Ct. Pompano Beach, FL 33069	Add Remove
···			Add Remove
			AddRemove
			Add Remove
			Add Remove
D. If amend	ling any other information, ent	er change(s) here: (Attach additional sheets, if necessar	y.) 
	,		1007 13 1007 13
Dated	October 8th	, _2009	13 PH # 55
	Signature of	a member or authorized representative of a member	<u> </u>
		Kevin Alexander Typed or printed name of signee	······································
		lyped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00