

# L090000 82845

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 NOV -5 PM 2:48

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C. LEWIS

NOV 8 2010

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Clermont's Finest Barbershop, L.L.C  
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 A. Gonzalez

Name of Person

Firm/Company

12001 Golden Star Lane

Address

Clermont FL 34711

City/State and Zip Code

gonza lez marka @ ya hoo .com

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

For further information concerning this matter, please call:

Mark A. Gonzalez

Name of Person

at (352) 978-1993

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

FILED

2010 NOV -5 PM 12:48

Clermont's Finest Barber shop, L.L.C.  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on August 27, 2009 and assigned  
Florida document number L09000082845.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A Same

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:

Same

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

Same

(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:

Mark A. Gonzalez

New Registered Office Address:

12001 Goldenstar Lane

Enter Florida street address

Clermont

Florida

34711

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>                                                      |
|----------------------|----------------------|-----------------------------------------------------------|----------------------------------------------------------------------------|
| <i>Manager/owner</i> | <i>Ramón A. Díaz</i> | <i>682 South Grand Highway</i><br><i>Clement FL 34711</i> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| _____                | _____                | _____                                                     | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
| _____                | _____                | _____                                                     | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
| _____                | _____                | _____                                                     | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
| _____                | _____                | _____                                                     | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
| _____                | _____                | _____                                                     | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated 11/02/2010.

*Mark A. Gonzalez*  
Signature of a member or authorized representative of a member  
Mark A. Gonzalez  
Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2010 NOV -5 PM 2:48  
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