(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
· (Business Entity Name)
L09-84221 (Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: A. LUNT
- •
DEC 2 2 2009
EXAMINER

Office Use Only



600162683556

11/19/09--01027--003 **25.00



November 20, 2009

SANDRA STETTER 1467 SW 18 AVE. FT. LAUDERDALE, FL 33312

SUBJECT: BEVERLY ANN, LLC Ref. Number: L09000084221

We have received your document for BEVERLY ANN, 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):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Letter Number: 609A00036212

Agnes Lunt Regulatory Specialist II

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Bevery Ann, U Name of Limited	ed Liability Company	
The enclosed Articles of Amendment and fee(s) are subm	nitted for filing.	
Please return all correspondence concerning this matter to	o the following:	
Sandra Ste Beverly An	Name of Person n, UC Firm/Company	2809 DEC 21 SECRETARY TALLAHASSE
	18 Atenue	171 m
Fort Laude	Address Add	PH 2: 58 OF STATE E. FLORIDA
For further information concerning this matter, please cal	II:	
Sandra Stetter Name of Person	at (305) 4075777 Area Code & Daytime Telephone Number	er
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\text{Certificate of Status}\$	(additional copy is enclosed) Certified	ate of Status &
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Beverly Ar	nn, LLC.			17	į
(Name of the Limited I. (A F	Jability Company Torida Limited Lia	as it now appears of bility Company)	n our records.)		-m
The Articles of Organization for this Limited Lial Florida document number <u>L090000842</u> :		vere filed on 🕻 i	131/2009	EC Signal PA	ino laj
This amendment is submitted to amend the follow	-		,	1 2: 58 STATE FLORIDA	D
A. If amending name, enter the new name of t	<u>he limited liabili</u>	ty company here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Company,	" the designation	'LLC" or the ab	breviation
Enter new principal offices address, if applical	ole:	1467 SW	18 Avenue	シ	
(Principal office address MUST BE A STREET	ADDRESS)	Fort Laud	erdalt, Fi	33312	
Enter new mailing address, if applicable:		1467 SW	18 Avenue		
(Mailing address MAY BE A POST OFFICE BOX)		Fort Lauc	terdale, F	U 33312	
B. If amending the registered agent and/or registered agent and/or the new registered offi		ce address on our	records, enter	the name of	the new
Name of New Registered Agent:	Sandra	a Stetter			
New Registered Office Address:	1467 Su	N 18 Avenue		1.1.	
	⊬ :47.		Florida street ad		
	Fort Lave	City	, Florida	33312 Zip Code	
New Registered Agent's Signature if changing Re	nictored Agents	•			

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 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 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>Name</u> <u>Title</u> **Address** Type of Action Sandra Steller MORM Add Remove ☐ Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ___12/4 nember or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00