# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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From:

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

Certificate of Status	0
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Page Count	04
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T. HAMPTON

DEC 1 8 2009

**EXAMINER** 

### **FAX COVER SHEET**

ТО		
COMPANY		
FAX NUMBER	18506176383	
FROM	Tony Burroughs	
DATE	2009-12-17 11:38:29 PST	
RE	FL SOS	

#### **COVER MESSAGE**

Tony Burroughs | Special Filings Specialist Business Special Filing 323,962.8600 x862 | Fax 323,337,0742| tburroughs@legalzoom.comwww.legalzoom.com | 7083 Hollywood Blvd., Suite 180, Los Angeles, CA 90028

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Sent: Thursday, December 17, 2009 1:35 PM

To: Tony Burroughs

Subject:

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# COVER LETTER

Division of Corporations	
SUBJECT: LYDERMA, LLC	of Limited Liability Company)
(:virile	as Entitled Classificy Company)
The enclosed Articles of Amendment and fee(s)	are submitted for filing.
Please return all correspondence concerning this	matter to the following:
* **.	
Tony Burroughs	
S. Carlotte and Car	(Name of Person)
Legalzoom.com	ı. Inc.
	(Firm/Company)
7092-Hallawaa	A Blue Cuite agn
7005 Hollywood	d Blvd., Suite 180 (Address)
·	
Los Angeles, C	City/State and Zip Code)
i de la companya de	(vary/vante link ziji (date)
For further information concerning this matter, a	olease call:
Tony Burroughs (Name of Person)	at (323) 962-8600 (Area Code & Daytime Telephone Number)
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A second of the
The december of the content of the content of	
Enclosed is a check for the following amount:	
\$25:00 Filing Fee \$30.00 Filing Fee Certificate of St	& \subseteq \$55.00 Filing Fee &  \$
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

SECRETARY OF STATE OF CORPORATION

LYDERMA, 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 Li	iability:Company wer	e filed on <u>09/08/20</u>	09 and assigned
Florida document number <u>L09000086273</u>			
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	(the limited liability	company here:	•
The new-name must be distinguishable and end wit "L.L.C."	h the words "Limited I	iability Company," the	e designation "LLC" or the abbreviation
B. If amending the registered agent and/or the new registered of		address on our re	cords, enter the name of the new
Name of New Registered Agent:	Nine	Star	HoldingsLLC
New Registered Office Address:	<u>4051</u>	4 7+h F (Enter Fle	Ave Ste 101.  pridu street address).
		E.	, Florida 3.33/4 (Zip Code)

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

Thereby 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. Thereby control that the limited liability company has been notified in writing of this change.

Dovid Hovs dorff, member of Work Hegistered Agent)

Nine Star Holdings, LLC

MGR≃ Manager

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:

MGRM'= Managing Member Address Title Type of Action Name MGRM Nine Star Holdings, LLC 4051 S.W. 47th Ave. Ste. 101 Davie FL 33314\_\_\_ MGRM DAVID:HAUSDORFF 4051 SW 47TH AVE., STE, 101 &102 **DAVIE FL 33314** Remove MGRM. ALAN COHEN 4051 SW 47TH AVE. STE. 101 & 102 DAVIE FL 33314 Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated. Signature of a member or authorized representative of a member

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Typed or printed name of signee

DAVID HAUSDORFF, Member

Filing Fee: \$25.00