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(Requestor's Name)				
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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SECRETARY OF STATION DIVISION OF CORPORATION

## **COVER LETTER**

TO: Registration Se  Division of Cor			644			
SUBJECT:	Schuh E	nterprises, LLC				
		ited Liability Company				
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
		Eva M Schuh				
		Name of Person				
	Se	chuh Enterprises, LLC				
		Firm/Company				
		17491 SW 35th St				
		Address				
	Miramar FL 33029					
		City/State and Zip Code				
	E-mail address: (	annuity@comcast.net to be used for future annual report notific	cation)			
For further information co	oncerning this matter, please o					
_						
Ev Name of	a M Schuh	at ( <u>954</u> )  Area Code & Daytime	381-5694			
ivanie oi	Terson	Alea Code & Dayline	Telephone (Valide)			
Enclosed is a check for th	e following amount:					
<b>√</b> \$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

Sobub Enterprises IIC

FILED SECRETARY OF MIAIL DIVISION OF CORPORATION:

11 JAN -5 PM 1: 57

(Name of the Limite	d Liability Company as it now appeal	s on our records.)
(Ivame of the Diffice	d Liability Company as it now appeal A Florida Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited I		09/21/09 and assigned
This amendment is submitted to amend the following	llowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>e</u> :
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter the name of the new</u>
Name of New Registered Agent:	Eva M Schuh	
New Registered Office Address:		
	En	ter Florida street address
		, Florida
	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager
MGRM = Managing Member

Title .	<u>Name</u>	Address	Type of Action
MGRM	Alan J Schuh	17491 SW 35th St Miramar FL 33029	Add Remove
			Add Remove
			Add Remove
<del> </del>			Add Remove
<del></del>			Add Remove
			Add Remove
D. If amendi ——	ng any other information, enter change(	(s) here: (Attach additional sheets, if necessary.)	_
			DIVISION OF CORP
Dated	January 3rd , 201		**************************************
-	·	r authorized representative of a member	
	·	va M Schuh	
_		r printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00