

L 09000114561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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10 JUL 22 PM 2:44

S. HAWKES

JUL 23 2010

EXAMINER



April 24, 2010

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

RE: Equipack, LLC L09000114561

To Whom It May Concern:

On December 30, 2009 we submitted a resignation of a member and our amendment to the articles. This change was never posted on sunbiz.org.

We are now resubmitting those changes dated 12/30/2009 and enclosing our check for the same.

In addition we added our annual fees for 2010.

Should you have any questions, please do not hesitate to contact me directly.

Sincerely,

Greg Winters
Managing Member

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Equipack, LLC
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:

Greg Winters

Name of Person

Equipack, LLC

Firm/Company

3539 SW 74th Avenue

Address

Ocala, Florida 34474

City/State and Zip Code

greg@equi-pack.com

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

For further information concerning this matter, please call:

Greg Winters

Name of Person

at (352)

598-9484

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**

Equipack, 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 Liability Company were filed on 12/2/2009 and assigned
Florida document number L09000114561

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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:

New Registered Office Address:

Enter 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	U.S. Equine Direct, Inc.	3539 SW 74th Avenue Ocala, Florida 34474	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated December 30, 2009

Taylor Johnson
Signature of a member or authorized representative of a member
Taylor Johnson
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00