

LO9000120058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

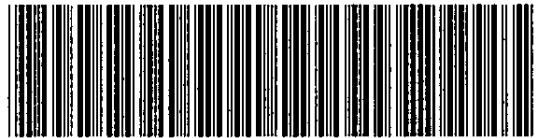
(Business Entity Name)

(Document Number)

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10 APR -5 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. ~~Outgoing~~ APR - 6 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ORGPLUS STORAGE SYSTEMS, 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:

ANNA MCCLOSKEY

Name of Person

ORGPLUS STORAGE SYSTEMS, LLC

Firm/Company

8660 CRESTGATE CIRCLE

Address

ORLANDO, FL 32819

City/State and Zip Code

ACE2615@AOL.COM

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

For further information concerning this matter, please call:

ANNA MCCLOSKEY

Name of Person

at (407)

876-1991

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2010

ANNA MCCLOSKEY
8660 CRESTGATE CIRCLE
ORLANDO, FL 32819

SUBJECT: ORGPLUS STORAGE SYSTEMS, LLC
Ref. Number: L09000120058

We have received your document for ORGPLUS STORAGE SYSTEMS, 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):

You failed to make the correction(s) requested in our previous letter.

Amendments to articles of organization of a Florida limited liability company must comply with section 608.411, Florida Statutes. For your convenience, we are enclosing the appropriate form and instructions.

You may not reference Florida profit corporation or Articles of incorporation.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 610A00004459

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

10 APR -5 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORGPLUS STORAGE SYSTEMS, 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 DECEMBER 9, 2009 and assigned
Florida document number L09000120058.

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:

ANNA MCCLOSKEY

New Registered Office Address:

961 ARMSTRONG BLVD., SUITE A

Enter Florida street address

KISSIMMEE

, Florida

34741

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.

Anna McCloskey
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>
MGRM	ANNA MCCLOSKEY	961 ARMSTRONG BLVD., SUITE A KISSIMMEE, FL 34741	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ADRIAN MCCLOSKEY	8660 CRESTGATE CIRCLE ORLANDO, FL 32819	<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

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

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10 APR -5 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated MARCH 24TH, 2010

✓ Anna McCloskey
Signature of a member or authorized representative of a member

ANNA MCCLOSKEY
Typed or printed name of signee