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SECRETARY OF STATE
ALL AHASSEF, FLORIDA

D. BRUCE

OCT 4 2010

**EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 23, 2010

RICHARD RUBINO 301 W ATLANTIC AVE O-8 DELRAY BEACH, FL 33444

SUBJECT: DELRAY-LAW, P.L.L.C.

Ref. Number: L10000017238

We have received your document for DELRAY-LAW, P.L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

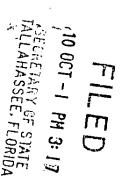
We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 610A00022623



## **COVER LETTER**

TO: Registration Division of C	n Section Corporations				
SUBJECT:	· · · · · · · · · · · · · · · · · · ·	Y-LAW, P.L.L.C.			
	Name of Lim	ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corre	spondence concerning this matter	to the following:			
		RICHARD RUBINO			
		Name of Person .			
	-	Firm/Company			
301 W ATLANTIC AVE 0-8					
		Address			
	City/State and Zip Code				
	E-mail address: (	to be used for future annual report notification)  ART ASA SS  O  O  O  O  O  O  O  O  O  O  O  O			
For further information	on concerning this matter, please of	774 - A 774			
	CHARD RUBINO	at (561) 819-5399 Signary Control Area Code & Daytime Telephone Number Control			
		<b>1</b>			
Enclosed is a check for	or the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

### MAILING ADDRESS:

TO:

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

_	Delray Lav	w, LLC		
(Name of the Limite	ed Liability Company (A Florida Limited Lia	y <mark>as it now appea</mark> ability Company)	rs on our records.)	·
<b>⇒</b>				
The Articles of Organization for this Limited Liability Company were filed on			02/15/2010	and assigned
Florida document numberL100000	17238			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liabil	ity company hei	<u>·e</u> :	
	N/A			
The new name must be distinguishable and end w "L.L.C."	vith the words "Limite	d Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appl	icable:	N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)			
				<b>5</b>
			A H	
Enter new mailing address, if applicable:		N/A	SS	
(Mailing address MAY BE A POST OFFICE BOX)			m <sub>©</sub>	⊋ M
				<u> </u>
·			<del>2</del> 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
B. If amending the registered agent and	l/or registered offic	ce address on o	our records, enter t	he name of the nev
registered agent and/or the new registered	office address here:			
Name of New Registered Agent:	N/A		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	N/A	<del></del>		
		En	ter Florida street addr	ess
			, 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action				
MGRN	ALLEN IRA GLASS	301 W Atlantic Ave 0-8 Delray Beach FL 33444	Add Remove				
MGR	ELISSA M RUBINO	301 W Atlantic Ave 0-8 Delray Beach FL 33444	Add  Remove				
			Add Remove				
-	<u>-</u>		Add Remove				
			Add Remove				
			Add Remove				
D. If an		change(s) here: (Attach additional sheets, if ne	ecessary.)				
	N/A						
	7		10 0				
	OCTORER 1	2040	TARY O				
Dated	OCTOBER 1  X Color of a positive of a positi	2010  nember or authorized representative of a member	FSTATE FLORIDA				
	Signature 01 a ii	RICHARD RUBINO					
	Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00