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EXAMINER



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10/01/10--01028--005 **25.00

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SECRETARY OF STATE
ALLAHASSEE ELONG

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AUSTATE BUSINESS CONSULTANTS OF HOLLYWOOD, 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:		
RICHARD RASH Name of Person		
AUSTATE BUBINESS CONSULTANTS OF HOLLYMOOD, LLC Firm/Company		
900 N. KEDENAL AWY. SURE 108 Address		
HOLLYWOOD, FL 33020 City/State and Zip Code		
ABC. CREDIT. MIGNEL @ GMASL. COM E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Mi Guel Moith at (954) 272 - 8985 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(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

AUSTATE BUSINESS CONSULTANTS OF HOLLYWOOD, UC (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 w	ere filed on Z-25-/O and assigned	
Florida document number <u>L100000 21938</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
ABC OF HOLLYWOON, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation		
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	900 N. FEDERAL HWY.	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 108 \\ \(\sigma_{\text{co}} \).	
	HOLLYWOOD, FL533820	
	TA ASS	
Enter new mailing address, if applicable:	SAME AS ABOVE SET - 1	
(Mailing address MAY BE A POST OFFICE BOX)	ू ३ 📶	
	<u> </u>	
	07 ND _A	
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e 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:	HAKD RASH	
New Registered Office Address: 900	N. FEDERAL HWY. SUPE 108 Enter Florida street address	
<u>Hou</u>	YWOOD , Florida 33020 City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance of my duties, and I am familiar with and ovided for in Chapter 608, F.S. Or, if this document is	

Thanging 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** <u>Name</u> **Address Type of Action** MGRM DISTINGUISHED ENTERPRISES, INC. 501 SE 2 ST # 1303 FT. LANDEMONIE, FL 33301 Kemove MM MARKETING IDEAS UC ∏Add Remove □Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEMEMBER 27, 2010. Signature of a member or authorized representative of a member Micuel MoitA

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00