C10000032152

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T. CLINE

JAN 2 7 2012

EXAMINE

COVER LETTER

SUBJECT: LN Systems Commercial 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:					
Lenard Nelson					
Name of Person					
LN Systems Commercial LLC					
Firm/Company					
3535 S. Ocean Drive, #602					
Address					
Hollywood, FL 33019					
City/State and Zip Code					
galinakornblum@yahoo.com					
E-mail address: (to be used for future annual report notification)	2012 JAN ANDRET				
For further information concerning this matter, please call:	1				
To Turder morniation concerning this matter, please can.	SHA or t				
Lenard Nelson at (310) 365-3987					
Name of Person Area Code & Daytime Telephone Number					
	€ 5				
Enclosed is a check for the following amount:					
(additional copy is enclosed) Certified C	of Status &				

MAILING ADDRESS:

Registration Section
Division of Corporations

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

LN Systems Co	mmercial LL	<u> </u>		
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appear iability Company)	's on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	3/24/2010	and ass	signed
Florida document numberL10000032152				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	lity company her	<u>e</u> :		
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Compa	ny," the designation "L	LC" or the a	abbreviation
Enter new principal offices address, if applicable:			20	
(Principal office address MUST BE A STREET ADDRESS)		P	\(\frac{1}{2}\)	- and adjulyan
		7.* 7.*		Mary Hardy
		<u>ଦ</u> ିନ ମଧ୍ୟ ମଧ୍ୟ	<u>(</u> ₹ 5	J
Enter new mailing address, if applicable:		ئىدىئىـ	9	
(Mailing address MAY BE A POST OFFICE BOX)		2	N Se	The said
		2.4	F11 60	
B. If amending the registered agent and/or registered off	ice address on o	ur records, enter ti	he name o	of the new
registered agent and/or the new registered office address here				
Name of New Registered Agent:				
•				
New Registered Office Address:	Ent	er 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>	Address	Type of Action
MGRM	LN Systems Mgmt I	LC 3535 S. Ocean Drive, #6 Hollywood, FL 33019	Add Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add
			Add Remove
			SARY 26 Add Remove
D. If amend	ling any other information,	enter change(s) here: (Attach additional shee	ts, if necessary)
——————————————————————————————————————	January 16	2042	
Dated	January 16		
	Signatur	of a member or authorized representative of a me	mber
		Lenard Nelson	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00