

L10000032611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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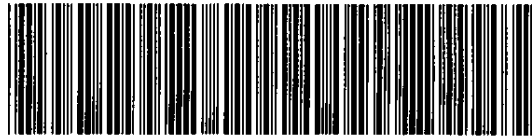
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

APR -1 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: OH HEAVENLY TAN, 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 J. COLE, III, ESQ.

Name of Person

R. JOHN COLE, II, & ASSOCIATES, P.A.

Firm/Company

46 N. WASHINGTON BLVD., STE. 24

Address

SARASOTA, FL 34236

City/State and Zip Code

rc3@rjcolelaw.com

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Richard J. Cole, III

Name of Person

at ( 941 )

365-4055

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**

OH HEAVENLY TAN, 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 3/25/2010 and assigned Florida document number L10000032611.

**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

| <u>Title</u> | <u>Name</u>        | <u>Address</u>                              | <u>Type of Action</u>  |
|--------------|--------------------|---|--|
| MGRM         | MATTHEW J MONTONEY | 2692 BELLINGHAM CT.<br>CAPE CORAL, FL 33991 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGRM         | MARK J MONTONEY    | 2692 BELLINGHAM CT.<br>CAPE CORAL, FL 33991 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

Dated March 26, 2010

Signature of a member or authorized representative of a member

RICHARD J. COLE, III, Esq.

Typed or printed name of signee

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