

L10000034672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

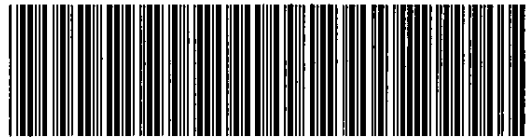
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
FALL HAVEN, FLORIDA

2010 NOV 15 PM 2:26

FILED

C. LEWIS
NOV 16 2010
EXAMINER

11/08/2010

Gentlemen -

Please return the amendment
to my new MGRM Halina Brandt
Manak at 135 Ocean Parkway,
apt. 120, Brooklyn, New York 11218.

Thank you,

Jack Manak, MGR
NDEK SYSTEMS LLC

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MDEK 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:

Rick Manak
Name of Person

MDEK Systems LLC
Firm/Company

500 Three Islands Blvd., #811
Address

Hallandale Beach, Florida 33309
City/State and Zip Code

rick.m@earthlink.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rick Manak at (**347**) **569 7318**
Name of Person 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

FILED

2010 NOV 15 PM 08:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MDEK 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 March 26, 2010 and assigned
Florida document number H10000074723-3 410000034672

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	Halina Brandt Manak	135 Ocean Parkway, 12U, Brooklyn, New York 11218	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

PLEASE RETURN THE AMENDMENT

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

2010 NOV 15 PM 1:26
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 FLORIDA SECRETARY OF STATE

Dated November 8, 2010

Rick Manak
Signature of a member or authorized representative of a member

Rick Manak, MGR

Typed or printed name of signee