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(Re	questor's Name)	<u> </u>		
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D. BRUCE

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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2010

CRAIG D BLUME ESQ. CRAIG D BLUME PA 800 HARBOUR DRIVE NAPLES, FL 34103

SUBJECT: DONALD L. FOIANI LLC

Ref. Number: L10000039207

We have received your document for DONALD L. FOIANI LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or it is not distinguishable from the name of an existing entity. Section 608 406, is Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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: 410A00013718

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 Tallahassee, Florida 32314

COVER LETTER

10;	Division of Co			
SUBJE	CT.	DONAL	L. FOIANI, LLC	
SUBJE			nited Liability Company	
The end	closed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please 1	return all corresp	ondence concerning this matte	er to the following:	
			CRAIG D BLUME ESQ	
			Name of Person	
			CRAIG D BLUME PA	
		•	Firm/Company	10.
		8	000 HARBOUR DRIVE	
			Address	\$ 6 F
		NA	PLES, FLORIDA 34103	OF SI
			City/State and Zip Code	STATE LORIBLE
		E-mail address:	(to be used for future annual report notification	<u>on)</u>
For furt	her information of	concerning this matter, please	call:	
<u></u>	· · · · · · · · · · · · · · · · · · ·	AIG D BLUME	at (239) 417 Area Code & Daytime Tel	7-4848 lephone Number
Enclose	d is a check for t	he 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)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>) L. FOIANI LLC</u>		
Company as it now appe nited Liability Company)	ars on our records.)	
npany were filed on	April 12, 2010	and assigned
•		
d liability company he	ere:	
AVIANO LLC		
"Limited Liability Comp	pany," the designation "LL	C" or the abbreviation
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<u>SS)</u>	3	
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	our records, enter the	e name of the nev
ss here:		
Enter Florida street address		
	Floride	
City	, FIOI IUA	Zip Code
	company as it now appenited Liability Company mpany were filed on d liability company here aviance Liability Company "Limited Liability Company "Edinited Liability Company here "Limited Liability Company here "Ess) red office address on as here:	"Limited Liability Company," the designation "LI SSS) Ted office address on our records, enter the ss here: Enter Florida street address, Florida

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 Title Name <u>Address</u> Type of Action MGR Donald L. Foiani 4308 Longshore Way South ☐ Add Naples, Florida 34104 **✓** Remove MGR Lucia Foiani 4308 Longshore Way South Remove Naples Florida 34104 ☐ Add Remove Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary). 2010 Dated _ Signature of a member or authorized representative of a member

Donald L. Foiani

Typed or printed pame of sizes.

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee