

L10000040127 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

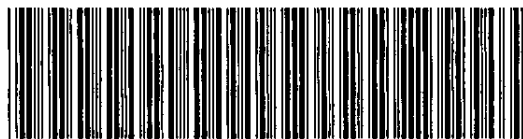
(Business Entity Name)

(Document Number)

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FILED  
2013 SEP 17 PM 6:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

SEP 18 2013

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Imagine North Port Sports Boosters 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:

Cherie DeHay  
Name of Person

Imagine North Port Boosters LLC  
Firm/Company

2757 Sycamore Street  
Address

North Port, FL 34289  
City/State and Zip Code

Cherieanndehay@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cherie DeHay at ( 941 ) 809-6828  
Name of Person Area Code & Daytime Telephone Number

2013 SEP 17 PM 6:10  
TALLAHASSEE, FL 32301

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)

Check already sent  
& cashed ☺  
Due \$10.00 refund

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**

Imagine North Port Sports Boosters 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 4/13/2010 and assigned Florida document number L10000040127.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Imagine North Port Boosters LLC

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)

2757 Sycamore Street  
North Port, FL 34289

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2757 Sycamore Street  
North Port, FL 34289

**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:

Cherie A. DeHay

New Registered Office Address:

3715 Acorn Street

*Enter Florida street address*

North Port

*City*

Florida

34286

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

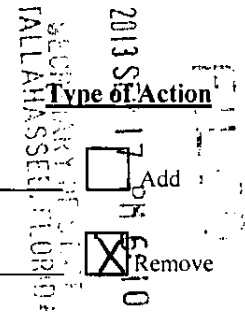
*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided 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.*

Cherie A. DeHay  
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>
MGR	Rudolph Banuelos	685 Darwin Road Venice, FL 34293	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Jennifer Gowens	4131 Wooley Avenue North Port, FL 34287	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Robin Hayes	6016 Abigail Avenue North Port, FL 34287	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jeremy Gowens	4131 Wooley Avenue North Port, FL 34287	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Tina Smith	6956 Dabarsky Avenue North Port, FL 34291	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Christine Deveney	2419 Margaret Lane North Port, FL 34286	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove



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

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Dated September 12, 2013

Cherie A. Dettay

Signature of a member or authorized representative of a member

Cherie A. Dettay

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 SEP 17 PM 6:10  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 29, 2013

CHERIE DEHAY  
2757 SYCAMORE STREET  
NORTH PORT, FL 34289

SUBJECT: IMAGINE NORTH PORT SPORTS BOOSTERS LLC  
Ref. Number: L10000040127

2013 SEP 17 PM 6:10  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

We have received your document for IMAGINE NORTH PORT SPORTS BOOSTERS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 413A00020587