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EXAMINER

Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Fulture Land Charm 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:
Lee Segal Mark Pena Name of Person
Law Office of Mark E. Person JA.
334 S. Hyde Park Ave. SSRY Address
Tampa, FL 33606 EST City/State and Zip Code
E-mail address: (To be used for future annual report notification)
For further information concerning this matter, please call:
Ali Alchikh at (813) 382-1414 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (Certified Copy) Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

appears on our records.) The Articles of Organization for this Limited Liability Company were filed on Q 10000043289 Florida document number 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

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.

City

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	
			Add Remove	
			Add Remove	
			Dadd Datemove	
			Add Remove	
		RIDA	Add Remove	
			Add Remove	
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessa	ry.)	
<u></u>				
Dated	,			
		er or authorized representative of a member ina Sharafeddin d or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00