L10000058698

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ress)	
(City/	State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Name	e)
(Doci	ument Number)	
Certified Copies		of Status
Special Instructions to Fi	ling Officer:	
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Office Use Only



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SECRETARY OF STATE.
TALLAHASSEE, FLORIDA

2012 JAN -3 AM 8: 37

J. SAULSBERRY
EXAMINER

JAN 6 2012

COVER LETTER

TO:	Registration So Division of Co					
SUBJI	CCT:	Dependa	ble Felons, LLC			
50.50			ted Liability Company			
			•			
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspo	ondence concerning this matter	to the following:			
			Maria Mesaros Name of Person		_	
				•		
		<u>De</u>	pendable Felons, LLC Firm/Company	<u> </u>		
			Pitte Company			
			P.O. Box 48112		. Ags s	%
			Address		ECRI LAH	
			Tampa, FL 33646		منتد ري	1
			City/State and Zip Code		- 3336 0 XX	ω [
		mar	iamesaros@yahoo.com to be used for future annual repo	m	FS	- Company
				n notification)	TATE DRIDE	ထု ်…် မ
For fur	ther information of	concerning this matter, please of	all:			4
	Ma	aria Mesaros	at (_570_)	814-9678		
	Name o	of Person	Area Code & I	Daytime Telephone Numb	er	
Enclos	ed is a check for t	the following amount:				
⊌\$ 25	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certific	Tiling Fee, cate of Status ed Copy onal copy is e	

MAILING ADDRESS:

Registration Section

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

(Name of the Limited)	ependable Fo	elons, LLC	on our records)		
(Name of the Limited) (A	Florida Limited Lia	bility Company),	on our records.		
The Articles of Organization for this Limited Lia	ability Company w	vere filed on	June 2, 2010	and ass	igned
Florida document number <u>L10000058</u>	698				
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabili	ity company her	≧ :		
	N/A				
The new name must be distinguishable and end with L.L.C."	the words "Limited	d Liability Compar	ny," the designation	"LLC" or the a	bbreviation
Enter new principal offices address, if applica	ıble:	N/A		201 TAL	
Principal office address MUST BE A STREET				CRE CRE	<u> </u>
				ASE T	
				23.70 0 A.0	in i
Enter new mailing address, if applicable:	!	N/A		N -3 AH 8: 37	THE STATE OF THE S
Mailing address MAY BE A POST OFFICE E	<u>80X)</u>			REE W	, <u>.</u>
				Þ	
B. If amending the registered agent and/or the new registered off			ur records, <u>ente</u>	r the name o	f the new
Name of New Registered Agent:	N/A				
New Registered Office Address:					
		Ente	er Florida street a	ddress	
		r-n-n-	, 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 = Mar MGRM = M	nager lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Bern Podcasy	731 N. 20th St. Philadelphia, PA 19130	Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	. SE
		A SSEE, FI	CRETAI
Dated	December 29 ,		ED M 8:37
	()	member or authorized representative of a member Jeffrey Mesaros Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00