

L10000064083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

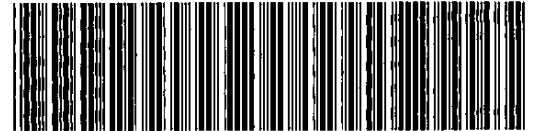
(Business Entity Name)

(Document Number)

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B. KOHR

DEC - 1 2010

EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV 29 PM 1:34

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Addiction Ink 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:

Beverly Tedesco
Name of Person

Addiction Ink
Firm/Company

8121 Hercules Dr.
Address

Las Vegas Nevada 89128
City/State and Zip Code

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

For further information concerning this matter, please call:

Beverly Tedesco at (405) 570-5579
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

SECRET
DIVISION OF CORP.
10 NOV 29 PM 1:3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Addiction Ink LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY
DIVISION OF CORP.
10 NOV 29 PM 1:35

The Articles of Organization for this Limited Liability Company were filed on 6-16-2010 and assigned
Florida document number L10000064083.

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 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:

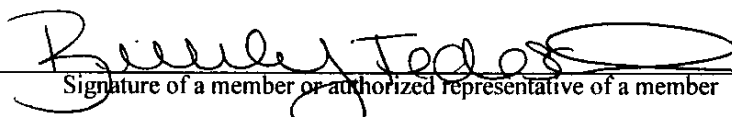
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Phillip C. Tedesco	8121 Hercules Dr Las Vegas, NV 89128	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Vincent O Tedesco	6379 Shadydale Ave Spring Hill, FL 34609	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Nicole A Tedesco	6379 Shadydale Ave Spring Hill, FL 34609	<input type="checkbox"/> Add <input checked="" 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

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

Dated _____, _____.



Signature of a member or authorized representative of a member

Beverly J. Tedesco

Typed or printed name of signee