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SECRETARY OF STATE

D. BRUCE

OCT 28 2011

**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2011

JESUS MAGANA 9336 127TH AVE FELLSMERE, FL 32948

SUBJECT: JESUS MAGANA LLC Ref. Number: L10000072757 SECRETARY OF STATES
TALLAHASSEE, FLORIES

We have received your document for JESUS MAGANA LLC and your check(s) totaling \$30.00. 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, 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: 811A00023834

## **COVER LETTER**

| TO: Registration S Division of Co | ection ,<br>rporations                     |   |   |                      | • ,   |
|-----------------------------------|--|---|---|----------------------|-------|
| SUBJECT:                          |  | Magana, LLC   | ······································                          |                      |       |
|                                   | Name of Lim                                | ited Liability Company  |   |                      |       |
| The enclosed Articles of          | Amendment and fee(s) are sul               | bmitted for filing.   |   |                      |       |
| Please return all correspondent   | ondence concerning this matter             | r to the following:   |   |                      |       |
|                                   |  | Jesus Magana  |   |                      |       |
|                                   |  | Name of Person  |   |                      |       |
|                                   |  | Firm/Company  |   |                      |       |
|                                   |  | 9336 127th Ave  | Ä   | ∑e? <u> </u>         |       |
|                                   |  | Address   | A   | 1-001<br>            | . –   |
|                                   |  | Fellsmere, FL 32948   | AUS   | 127<br>1AR           |       |
|                                   |  | City/State and Zip Code   |   | 10 <b>22</b>         | П     |
| •                                 | r  | nganadani@aol.com   |   | AM 9: 34<br>OF STATE | Ö     |
|                                   | E-mail address: (                          | to be used for future annual report notifi-                       | cation)   | <u>`</u>             |       |
| For further information of        | concerning this matter, please of          | call:   | ×   |                      |       |
|                                   | sus Magana                                 | at ( )  | 633-6991  |                      |       |
| Name o                            | of Person                                  | Area Code & Daytime   | : Telephone Number  |                      |       |
| Enclosed 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) | S60.00 Filing land Certificate of Certified Copy (additional co | f Status &<br>py     | osed) |
| MAII                              | ING ADDRESS:                               | STREET/COURI  | ER ADDRESS:   |                      |       |

Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section

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

## ARTICLES OF AMENDMENT • TO ARTICLES OF ORGANIZATION OF

| Jesi  | us Magana,LLC                |                          |   |
|---|------------------------------|--------------------------|---|
| (Name of the Limited Liabilit<br>(A Florida                       | y Company as it now appea    | rs on our records.)      |   |
| (11 1011011   | Emitted Educatity Company)   |                          |   |
| The Articles of Organization for this Limited Liability           | Company were filed on        | 07/09/2010               | and assigned  |
| Florida document number L10000072757                              | ·                            |                          |   |
| This amendment is submitted to amend the following:               |                              |                          |   |
| A. If amending name, enter the new name of the lin                | nited liability company he   | re:                      | j<br>L  |
|   | Pointing, LLC (              | hon Haint                | ing. 2LC  |
| The new name must be distinguishable and end with the wo "L.L.C." | ords "Limited Liability Comp | any," the designation "L | LO or the abbreviation                                |
| Enter new principal offices address, if applicable:               |                              |                          |   |
| (Principal office address MUST BE A STREET ADD                    | RESS)                        |                          |   |
|   |                              |                          |   |
|   |                              |                          |   |
| Enter new mailing address, if applicable:                         |                              |                          |   |
| (Mailing address MAY BE A POST OFFICE BOX)                        |                              |                          |   |
|   |                              |                          |   |
| ;   | <u></u>                      |                          | Aug.  |
| B. If amending the registered agent and/or regis                  | stered office address on     | our records, enter t     | he name of the new                                    |
| registered agent and/or the new registered office add             | iress here:                  |                          | H. C. 1   |
|   |                              | Ç                        | 23.28<br>(3.78.28.28.28.28.28.28.28.28.28.28.28.28.28 |
| Name of New Registered Agent:                                     |                              | Ţ.                       |   |
| · ·   |                              |                          | S   |
| New Registered Office Address:                                    | Tr.                          | ter Florida street aলুব  | <u> </u>  |
|   | Er                           | ner 1 wriau sireet aan   | osba Ti-  |
|   |                              | , Florida                | 7. 0.1  |
|   | 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 = Ma<br>MGRM = 1                             | nnager<br>Managing Member        |   |   |
|--|----------------------------------|---|---|
| <u> </u>   | <u>Name</u>                      | Address   | Type of Action                                      |
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| <del></del>                                      |                                  |   | Add<br>Remove                                       |
| If amen  | ding any other information, ente | er change(s) here: (Attach additional sheets, if  | necessary.)   |
|  |                                  |   | III DCT 2   |
| <br>ated   | October 13th                     | , <u>2011</u> .<br>>                              | ILED<br>27 M 9: 34<br>ARY OF STATE<br>SSEE, FLORIDA |
|  | =                                | a member or authorized representative of a member |   |
|  |                                  | Typed or printed name of signee                   |   |

Page 2 of 2

Filing Fee: \$25.00