L1000086674

(Re	equestor's Name)			
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B. KOHR

JUN 18 2012

EXAMINER



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COVER LETTER:

TO: Registration S Division of Co			•
SUBJECT:		nterprises LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	赛"
		John Harp	MH 14 PH 4: 53
		Name of Person	
	C	Curo Enterprises, LLC	
		Firm/Company	
	Ş	912 Drew St STE 202	ري . اي اي ا
		Address	
	(Clearwater, FL 33755	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi-	cation)
For further information	concerning this matter, please of	eall:	
	John Harp	at (at (451-6510
Name	of Person	Area Code & Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

-3.

Curo l	Enterprises, LLC		
(Name of the Limited Liability (A Florida)	Company as it now appea Limited Liability Company)	rs on our records.)	星
The Articles of Organization for this Limited Liability C	company were filed on	8/18/2010	and assigned
Florida document numberL1000086674			and assigned
This amendment is submitted to amend the following:			ري ري
A. If amending name, enter the new name of the lim	ited liability company he	re:	
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Comp	any," the designation "L	.LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable:			•
(Mailing address MAY BE A POST OFFICE BOX)			
		·	
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on ress here:	our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:		·	
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
Now Devices and A	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager MGRM = Managing Member

<u>Title</u> <u>Name</u>	Address	Type of Action
MGRM Bloodworth, Herman	L 912 Drew Street STE 202 Clearwater, FL 33755	☐ Add ☑ Remove
		The man a second
		Demove
		□ Damaya
		Damous
D. If amending any other information, o	enter change(s) here: (Attach additional sheets, if	necessary.)
Luc 44		
Dated June 11		
Signature	of a member or authorized representative of a member John P Harp Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00