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B. KOHR

OCT 2 7 2010

**EXAMINER** 

10 OCT 25 PH 4: 55

AVISION OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT:	Name of Limited Liability Company					
The enclosed Articles of Ar	nendment and fee(s) are submitted for filing.					
Please return all correspond	tence concerning this matter to the following:					
	Eduardo Castillo					
	Cootelo Development LLC Firm/Company					
	230 Gun Yise Drive Suite 4					
	Key Bib Counce FL 33149 City State and Zip Code					
	E-mail address: (to be used for future annual report notification)					
For further information con	ere a at (305) 775 - 89 63  Area Code & Daytime Telephone Number					
Enclosed is a check for the	following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & S60.00 Filing Fee, Certificate of Status 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

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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:

MGRM = M	nager Ianaging Member		
Title	<u>Name</u>	Address	Type of Action
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D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
	61/10		_
Dated 10	(In an	- la Eduardo Casti	110
	Covie	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00