

L100000094347

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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FILED  
2012 JAN 12 AM 9:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER  
JAN 13 2012

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BRANDMOR, 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:

PEDRO MOREAU  
Name of Person

Firm/Company

383 EMERSON PLAZA APT 413  
Address

ALTAMONTE SPRING, FL 32701  
City/State and Zip Code

PEDROMOREAU@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO MOREAU at (407) 311-9076  
Name of Person Area Code & Daytime Telephone Number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 JAN 12 AM 9 03

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee    ☐ \$30.00 Filing Fee & Certificate of Status    ☐ \$55.00 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**

BRANDMOR LLC.

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

The Articles of Organization for this Limited Liability Company were filed on 09/09/10 and assigned  
Florida document number L10000094347

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)

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TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

PEDRO MOREAU

New Registered Office Address:

383 EMERSON PLAZA #413

Enter Florida street address

ALTAMONTE SPRING

City

Florida 32701

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.*

*P. Moreau*  
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>
MGR	PEDRO MOREAU	383 EMERSON PLAZA APT 413 ALTAMONTE SPRING, FL 32701	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	KENNYS BRANDO	155 S. COURT AVE APT 2306 ORLANDO, FL 32801	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

PEDRO MOREAU 100 SHARES

Dated JANUARY 04<sup>th</sup>, 2012

Signature of a member or authorized representative of a member

PEDRO MOREAU

Typed or printed name of signee

2012 JAN 12 AM 9 03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501,  
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION  
ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA  
SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF  
FLORIDA.

1. THE NAME OF THE CORPORATION IS:

BRANDMOR, LLC.

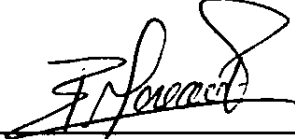
2. THE NAME AND ADDRESS OF THE REGISTERED  
AGENT/REGISTERED OFFICE IS:

PEDRO MOREAU.  
383 EMERSON PLAZA #413  
AUTAMONTE SPRING, FL 32701

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TALLAHASSEE, FLORIDA

HAVING BEEN NAMED THE REGISTERED AGENT/REGISTERED  
OFFICE AND TO ACCEPT SERVICE OF PROCESS FOR THE  
ABOVE STATED CORPORATION AT THE PLACE DESIGNATED  
IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE  
PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH  
AND ACCEPT THE OBLIGATIONS OF MY POSITION ON AS  
REGISTERED AGENT.



REGISTERED AGENT SIGNATURE

01/04/12

DATE