L10000109299

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J. BAULSBERRY EXAMINER OCT 28 2010

COVER LETTER

TO: Registration Division of	ı Section Corporations	; ,			
SUBJECT: <u>L</u> &	L System Servi Name of Limi	ces, LLC			
	/ Name of Limi	ted Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corre	spondence concerning this matter	to the following:			
	Luis M. Péi	(e 2			
		Name of Person			
		Firm/Company			
	3203 (rosspine	Way Suite 206			
		Address			
	Orlando, FL,	32829			
		City/State and Zip Code	A	2016 SE1	
	LLJ VStem Set K-mail address: (1	vices @ 9mail Com to be used for future annual report notifica	ation)) OCT	71
For further information	on concerning this matter, please c	all:	SSE	27 ARY	
Luis M	1. Pésez	at (786) <u>338 - S</u>	294	2010 OCT 27 PH 12:	
Nan	ne of Person	Area Code & Daytime	Telephone Number	8: 17	` <u>`</u>
Enclosed is a check for	or 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 F Certificate of Certified Cop (additional co	Status &	sed)

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

Tel: (786) 338-5294



To whom it may concern:

I was in the middle of opening a checking account and I realized that I made the mistake of not entering a manager's name in the LLC registration papers. I would like to add myself as the manager by amending the filed paperwork. Enclosed I have the proper amendment papers and a copy of the certificate issued to me. Due to this mistake the first business project has already been delayed. If there is any way to accelerate this process as quickly as possible I will greatly appreciate it. Thank you for your time.

Sincerely,

Luis M. Perez

2010 OCT 27 PM I2: 17

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LdL System Se	ervices, LLC	
(Name of the Limited Liab (A Flori	ility Company as it now appears of da Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabilit		/20 /2010 and assigned
This amendment is submitted to amend the following	g ;	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the L.L.C."	words "Limited Liability Company	," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	2010
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX	2	CRETARY OF STATE
3. If amending the registered agent and/or re registered agent and/or the new registered office a		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		Elevido due de addres-
	Enter	Florida street address
	City	, Florida 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> **Address** Type of Action uis 11 Pérez MGR Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Dated October 26 Signature of a member or authorized representative of a member 1. Pere 7. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

Certificate of Status

I certify from the records of this office that L & L SYSTEM SERVICES LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on October 20, 2010, effective October 20, 2010.

The document number of this company is L10000109299.

I further certify that said company has paid all fees due this office through December 31, 2010, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

Authentication Code: 101020092909-800186880388#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twentieth day of October, 2010

2010 OCT 27 PH 12: 17



Davin K. Roberts Secretary of State