

L10000132173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

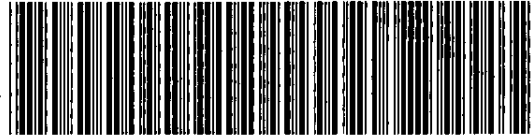
Special Instructions to Filing Officer:

A. LUNT

JUN 22 2010

EXAMINER

Office Use Only



500207635825

500207635825
05/23/11--01022--016 **43.75

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2011 JUN 21 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 1, 2011

STEVEN SUNQUIST
5455 TAMARIND RIDGE DR.
NAPLES, FL 34119

SUBJECT: MERIDIAPRO HOLDINGS LLC
Ref. Number: L10000132173

We have received your document for MERIDIAPRO HOLDINGS LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 811A00013422

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Meridiapro Holdings LLC.

DOCUMENT NUMBER: L10000132173

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEVEN SUNQUIST
Name of Contact Person

Meridiapro Holdings LLC.
Firm/ Company

5455 Tamarind Ridge Drive
Address

Naples FL 34119
City/ State and Zip Code

SUNQUIST007@COMCAST.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN SUNQUIST at (239) 961-5570
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed) |
|--|---|--|---|

Mailing Address

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

Street Address

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

2011 JUN 21 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Meridia pro Holdings 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 01/01/2011 and assigned
Florida document number L1000132173 or Confirmation # 200189096482

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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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:

John Hinds

New Registered Office Address:

10184 BOCA CIRCLE

Enter Florida street address

Naples
City

Florida

34109
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.

[Signature]
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>
33.33% Pres.	STEVEN SUNQUEST	10184 Boca Circle Naples, FL 34109	<input checked="" type="checkbox"/> Add Current member <input type="checkbox"/> Remove
33.33% V.P.	Sergio Petruzzella	10184 Boca Circle Naples, FL 34109	<input checked="" type="checkbox"/> Add Current member <input type="checkbox"/> Remove
33.33% Treas.	John Hinds	10184 Boca Circle Naples, FL 34109	<input checked="" type="checkbox"/> Add new member <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
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Adding (John Hinds) as a
officer w/ equal share
33.333%

Dated

June 8

2011

Signature of a member or authorized representative of a member

STEVEN SUNQUEST

Typed or printed name of signee