# L110000009331

(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:

Office Use Only



300209107633

06/20/11--01033--024 \*\*25.00



J. SAULSBERRY EXAMINER

JUN 22 2011

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: 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:
Lance Schnittman Name of Person
Norbar Capital LLC Firm/Company  6345 NW 23rd Ct., Boca Raton, FL 33496  Address
6345 NW 23rd Ct., Boca Raton, FL 33496
City/State and Zip Code  LSchnittman @ Norbar capital.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lance Schnittman  Name of Person  Name of Person  Area Code & Daytime Telephone Number  R  Enclosed is a check for the following amount:  S55.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$55.00 Filing Fee \& \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ Certified Copy \\ \text{(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

ital LLC			
	on our records.)		
ility Company were filed on	1/24/11	and assigne	ed
ing:			
ne limited liability company here:			
he words "Limited Liability Company	," the designation "L	LC" or the abbr	eviation
le:			
ADDRESS)			
		SEC.	
<u> </u>	<del></del>		77
		S 20 20 20 20 20 20 20 20 20 20 20 20 20	-
registered office address on our e address here:	r records, enter [	0.5	ie_new
			<u> </u>
	77 1 1 1 1 1		
Enter	r Florida street addi	ress	
('itv	, Florida	Zip Code	
	ability Company as it now appears or or ida Limited Liability Company)  ility Company were filed on	ability Company as it now appears on our records.) orida Limited Liability Company)  ility Company were filed on	and assignment of the company as it now appears on our records.)  It is company were filed on

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 Title MGRM **Address Type of Action** Lance Schnittman Add Remove ☐ Add Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Schnittman Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00