

L1100000/5558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

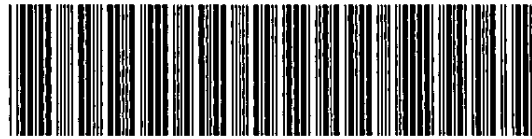
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 22 AM 9:02

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J. SAULSBERRY
EXAMINER

MAY 23 2012

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LSO ENTERPRISES, 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:

LINDSEY THOMPSON

Name of Person

LSO ENTERPRISES, LLC

Firm/Company

28711 S. DIESEL DR. UNIT 1

Address

BONITA SPRINGS, FL 34135

City/State and Zip Code

DWT1952@GMAIL.COM

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

LINDSEY THOMPSON

Name of Person

at (239) 898-1034

Area Code & Daytime Telephone Number

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**

LSO ENTERPRISES, 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 02/07/2011 and assigned Florida document number L11000015558.

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)

28711 S. DIESEL DR.

UNIT 1

BONITA SPRINGS, FL 34135

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

28711 S. DIESEL DR.

UNIT 1

BONITA SPRINGS, FL 34135

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CLERK OF STATE
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:

LINDSEY THOMPSON

New Registered Office Address:

28711 S. DIESEL DR. UNIT 1

Enter Florida street address

BONITA SPRINGS

, Florida

34135

City

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.

Lindsey Thompson
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>
MGRM	LINDSEY THOMPSON	28711 S. DIESEL DR. UNIT 1 BONITA SPRINGS, FL 34135	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	DAN THOMPSON	28411 DEL LAGO WAY BONITA SPRINGS, FL 34135	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	TERI THOMPSON	28411 DEL LAGO WAY BONITA SPRINGS, FL 34135	<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

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

Dated MAY 21, 2012

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 22 AM 9:02

FILED


Signature of a member or authorized representative of a member

LINDSEY THOMPSON

Typed or printed name of signee