

L110001816273ABC

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000181627 3)))



H110001816273ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FILED
2011 JUL 14 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TRANS AMERICAN MUSCLE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

RECEIVED
11 JUL 14 AM 7:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUL 15 2011
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

4

COVER LETTER

H11000181627

TO: Registration Section
Division of Corporations

SUBJECT: TRANS AMERICAN MUSCLE, 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:

Lynne S. K. Ventry, Esq.

Name of Person

Lynne S. K. Ventry, P.A.

Firm/Company

955 Northwest 17th Avenue

Address

Building N

City/State and Zip Code

Delray Beach, FL 33445

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

For further information concerning this matter, please call:

Lynne S. K. Ventry, Esq.

Name of Person

at (561)

279-2200

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

H11000181627

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2011 JUL 14 AM 8:10

Trans American Muscle, LLC

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on February 17, 2011 and assigned
Florida document number L11000020695

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
"LLC."

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)

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: Lynne S. K. Ventry, Esq.

New Registered Office Address: 955 Northwest 17th Avenue, Building N

Enter Florida street address

Delray Beach

City

Florida

33445

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.*

Lynne S. K. Ventry, Esq.
Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

H11000181627

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	Name	Address	Type of Action
MGR	Dean Mandarino	1813 NW 126th Way Coral Springs, FL 33071	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Joan Marchese	1813 NW 126th Way Coral Springs, FL 33071	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jason S. Silverman	3134 NW 63rd Street Boca Raton, FL 33496	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	John Famularo	2596 NW 124th Avenue Coral Springs, FL 33065	<input checked="" 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 July 14, 2011

Signature of a member or authorized representative of a member

Lynne S. K. Ventry, Esq.
Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00

H11000181627

2011 JUL 19 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED