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D. BRUCE

APR 0 5 2011

EXAMINER

COVER LETTER

	tration Section on of Corporations				
SUBJECT: _	The Law Offices of Milan "Bo" Samargya, LLC				
	Name of Limited Liability Company				
The enclosed	articles of Amendment and fee(s) are submitted for filing.				
Please return a	Il correspondence concerning this matter to the following:				
	Milan Samargya				
	Name of Person				
Robitaille & Samargya, LLC					
1904 West Main Street Address					
Inverness, Florida 34452					
	bo@rslawgroup.com				
	E-mail address: (to be used for future annual report notification)	FG A			
For further inf	ormation concerning this matter, please call:	FILED PR-4 PHID!			
	Milan Samargya at (352) 419-7999				
	Name of Person Area Code & Daytime Telephone Number	PH 12: 55			
		7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
Enclosed is a	heck for the following amount:				
\$25.00 Fill	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	of Status &			

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

The Law O	ffices of Mila	n "Bo" Samai	rgya, LLC					
(Name of the Limite	A Florida Limited I	iability Company)	,					
The Articles of Organization for this Limited I	were filed on	2/18/2011	and assigned					
Florida document number L1100002	. 1096							
This amendment is submitted to amend the fol	lowing:							
A. If amending name, enter the new name	of the limited liah	ility company her	<u>e</u> :					
	Robitaille <u>& Sa</u> r							
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compa	iny," the designation "l	LLC" or the a	abbrev	viation		
Enter new principal offices address, if applicable:		1904 West M	ain Street					
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	Inverness, FI	orida 34452	<u> </u>				
				<u> </u>	-20			
Enter new mailing address, if applicable:		1904 West M	ASSE	4-8				
(Mailing address MAY BE A POST OFFICE BOX)		Inverness, FI	orida 34452		P.			
B. If amending the registered agent and	for registered of	Tice address on a	our records enter 1	COm.	en Sign	new		
registered agent and/or the new registered of			our records, enter t	ne name c		<u>, 110 11</u>		
Name of New Registered Agent:	 							
New Registered Office Address:	1904 West Main Street							
		En	ter Florida street ada	lress				
		Inverness	, Florida	3445				
		City		Zip Code	2			

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 Name Address **Type of Action MGRM** Milan Samargya 1904 West Main Street ✓ Add Inverness, Florida 34452 ☐ Remove MGRM Sylvain R. Robitaille 1904 West Main Street 🔽 Add Inverness, Florida 34452 ☐ Remove ☐ Add Remove Add Remove $\prod Add$ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April Signature of a member or authorized representative of a member Milan Samargya Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00