

L110000 49119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

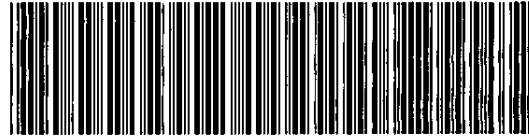
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A

Office Use Only

B. KOHR
NOV 21 2011
EXAMINER



500214361885

11/18/11--01033--005 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 18 AM 9:38

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MBA Concepts, 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:

Mercedes Price Harry
Name of Person
Vino's Picasso
Firm/Company
15250 S. Tamiami Trail, #109
Address
Fort Myers, FL 33908
City/State and Zip Code
Vinospicasso@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mercedes at 239, 288-6953
Name of Person 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 18 AM 9:38

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MBA Concepts, LLC

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 18 AM 9:38

The Articles of Organization for this Limited Liability Company were filed on 4/26/2011 and assigned
Florida document number L11000049119.

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**)

15250 S. Tamiami Trail
#109
Fort Myers, FL 33908

Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

15250 S. Tamiami Trail
#109
Fort Myers, FL 33908

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:

New Registered Office Address:

~~15250 S. Tamiami Trail, #109~~
Enter Florida street address
~~Fort Myers~~, Florida ~~33908~~
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.

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>
_____	_____	_____	<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

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Dated

November 14th, 2011

Signature of a member or authorized representative of a member

Mercedes Pryce Harry

Typed or printed name of signee