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SECRETARY OF STATE DIVISION OF COAPORATIONS

T. HAMPTON

JAN 1 n 2012

EXAMINER

COVER LETTER

TO:	Registration Secti Division of Corpo	on rations					
SUBJEC	er:	YOUNG	ASSASSIN LLC				
COST		Name of Lim	ited Liability Company	 			
The encl	osed Articles of An	nendment and fee(s) are su	bmitted for filing.				
Please re	turn all correspond	ence concerning this matte	er to the following:				
	Frank Smith, Esq.						
Name of Person							
Smith & Verbit PL							
Firm/Company							
	9900 Stirling Road, Suite 303						
Address							
	Cooper City, Florida 33024						
	City/State and Zip Code						
	· j ication) ·						
For furth	er information cond	erning this matter, please					
		,,					
		nk Smith	at (<u>954</u>)	965-8350			
	Name of Pe	erson	Area Code & Daytin	e Telephone Number			
Enclosed	is a check for the f	ollowing amount:					
\$25.0	O Filing Fee [\$30.00 Filing Fee & Certificate of Status	S55.00 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 ORGANIZATIO

FILED SECRETARY OF STATE IVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION OF

12 JAN -9 PH 3: 07

ne of the Limited Liability Cor (A Florida Limit	npany as it now appeated Liability Company)	rs on our records.)		
or this Limited Liability Comp	oany were filed on	May 10, 2011	and assigned	
L11000054944				
o amend the following:				
the new name of the limited	liability company he	<u>re</u> :		
shable and end with the words "I	Limited Liability Comp	any," the designation "L	LC" or the abbreviatio	
ddress, if applicable:				
ST BE A STREET ADDRESS	<u> </u>		<u> </u>	
				
f applicable:				
POST OFFICE BOX)				
		our records, <u>enter th</u>	e name of the nev	
on registered office address	nere .			
ered Agent:				
ee Address:				
	City	, Florida	Zip Code	
	me of the Limited Liability Composition (A Florida Limited Florida Limited Liability Composition this Limited Liability Composition (A Florida Limited Liability Composition (A Florida Liability Composition (A F	to amend the following: the new name of the limited liability company he shable and end with the words "Limited Liability Comp ddress, if applicable: ST BE A STREET ADDRESS) f applicable: POST OFFICE BOX) red agent and/or registered office address on ew registered office address here: ered Agent: the Address: External Company were filed on	the new name of the limited Liability Company as it now appears on our records.) or this Limited Liability 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 **Name Address Type of Action MGRM** Tache Guillard c/o Smith & Verbit PL ☐ Add √ Remove 9900 Stirling Road, Suite 303 Cooper City, Florida 33024 Tache Guillard Sec c/o Smith & Verbit PL ✓ Add 9900 Stirling Road, Suite 303 ☐ Remove Cooper City, Florida 33024 ☐ Add Remove Remove ∏Add Remove □]Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 3 2012 Dated Signature of a member or authorized representative of a member Frank Smith, Esq., General Counsel and Authorized Representative Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00