

41000060983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

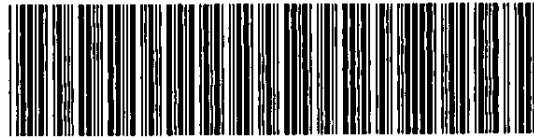
(Business Entity Name)

(Document Number)

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FILED
13 JUN 24 PM 4:00
CLERK OF COURT
TALLAHASSEE, FLORIDA

JUN 28 2013
D. BUTLER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BURN-OFF, 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:

LANCE P. RICHARD, ESQ.

Name of Person

LANCE P. RICHARD, PA

Firm/Company

51 SE Ocean Blvd.

Address

Stuart, Florida 34994

City/State and Zip Code

LRichard@LRichardLaw.com

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

For further information concerning this matter, please call:

GREGORY BLACKMAN at (772) 486-7058

Name of Person

Blackman

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
13 JUN 24 PM 4:00
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BURN-OFF, 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 5/24/11 and assigned
Florida document number L11000060983.

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)

51 SE Ocean Blvd.

Stuart, FL 34994

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

51 SE Ocean Blvd.

Stuart, Florida 34994

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:

Lance P. Richard, Esq.

New Registered Office Address:

51 SE Ocean Blvd.

Enter Florida street address

Stuart

City

, Florida 34994

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.

[Signature]
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

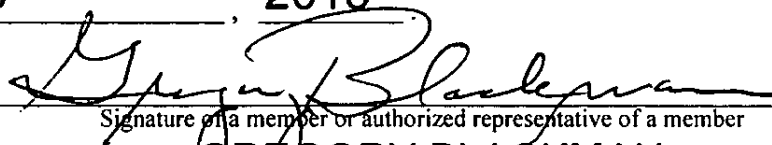
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP/MGR	PAT PRESUTTI	3900 AVE F	<input type="checkbox"/> Add
		FT. PIERCE, FL 34947	<input checked="" type="checkbox"/> Remove
SEC/TR/MGR	LOUIS P. DIVITA	12416 SE PLANDOME DR	<input type="checkbox"/> Add
		HOBE SOUND, FL 33455	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

13 JUN 21 PM 4:00
MAIL ROOM
12416 SE PLANDOME DR
HOBE SOUND, FL 33455

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

Dated **JUNE 18**, **2013**



Signature of a member or authorized representative of a member

GREGORY BLACKMAN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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13 JUN 24 PM 4:00
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