

L11 0000 68364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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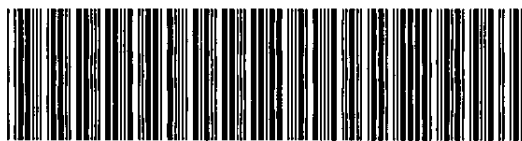
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SWAIN SCHULER SERVICES, 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:

CARL L. SCHULER

Name of Person

Firm/Company

1208 WOODLAND STREET

Address

ORLANDO, FLORIDA 32806-2355

City/State and Zip Code

CLS9053(A) CFL.RR.COM

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

For further information concerning this matter, please call:

CARL L. SCHULER

Name of Person

at (321) 229-2668

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SWAIN SCHULER SERVICES, 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 06/10/2011 and assigned Florida document number 211000068364.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

LADALI, LLC

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: NO CHANGE
(Principal office address **MUST BE A STREET ADDRESS**)

1208 WOODLAND STREET
ORLANDO, FL 32806-2355

Enter new mailing address, if applicable: NO CHANGE
(Mailing address **MAY BE A POST OFFICE BOX**)

1208 WOODLAND STREET
ORLANDO, FL 32806-2355

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:

NO CHANGE
Name of New Registered Agent:

CARL L. SCHULER

New Registered Office Address:

1208 WOODLAND STREET

Enter Florida street address

ORLANDO

City

, Florida

32806-2355

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.

NO CHANGE

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
MGRM = Managing Member

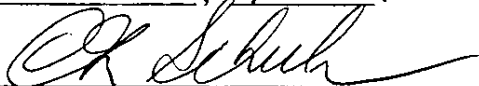
NO CHANGES

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

NO AMENDMENTS OR CHANGES

Dated NOVEMBER 21, 2013



Signature of a member or authorized representative of a member

CARL L. SCHULER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FL 32307