

(Requestor's Name)					
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(Business Entity Name)					
(Document Number)					
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G. MCLEOD

JUN 23 2011

**EXAMINER** 



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06/22/11--01024--018 \*\*25.00

TH JUN 22 AM 9: 27

## **COVER LETTER**

TO:	Registration S Division of Co			, t
SUBJ	LC.			
The en	iclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
BRUNO SCHUSCHNY			,	
		•	Name of Person	
		FEE RE	DUCTION SERVICES	S, LLC.
Fin			Firm/Company	
	13155 SW 134 ST. STE.220			
			Address	,
			MIAMI, FLA. 33186	
· · · · · · · · · · · · · · · · · · ·			City/State and Zip Code	
		.COM ort notification)		
For fur	ther information	concerning this matter, please	•	,
	BRUN	O SCHUSCHNY	at (_305_)	232-0272
Name of Person		Area Code &	Daytime Telephone Number	
Enclos	ed is a check for t	the following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	Registration Division of Clifton Buil	Corporations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FEE RE	<b>DUCTION SERVICES</b>	S, LLC		
( <u>Name of the Limited L</u> (A F	iability Company as it now appe lorida Limited Liability Company	ears on our records.) )		
The Articles of Organization for this Limited Lial	pility Company were filed on	06-13-2011	and assig	ned
Florida document number L110000688				
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability company h	ere:		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designation "L	LC" or the abb	oreviation
L.E.C.			5 <del>2</del> cs 🗻	
Enter new principal offices address, if applicab	ole:		Land Co. — — — — — — — — — — — — — — — — — — —	
(Principal office address MUST BE A STREET	ADDRESS)		£ 2	Ŷ
			22 58	grammet."
			A.	Ī
Enter new mailing address, if applicable:			F. S.	
(Mailing address MAY BE A POST OFFICE BO	9X)		27	
\$		· <del>· · · · · · · · · · · · · · · · · · </del>	33	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter t	he name of t	the new
Name of New Registered Agent:				
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·			·
	Ε	nter Florida street addi	ress	
		, Florida	•	
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

Title **Type of Action** Address Name **MGRM BRUNO SCHUSCHNY** 13155 SW 134 ST. STE.220 ☐ Add √ Remove MIAMI, FLA. 33186 KENNETH KOCIBAN MGRM 13155 SW 134 ST. STE.220 √ Add MIAMI, FLA. 33186 ☐ Remove ☐ Add ☐ Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A **JUNE 21** Dated \_\_ Signature of a member or authorized representative of a member **BRUNO SCHUSCHNY** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00