## L11000072436

(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:				

Office Use Only



300235053053

05/14/12--01026--010 \*\*43.75

12 JUN -1 PM 3: 53
SECRETARY OF STATE
PART AHASSEE, FLORIDA

B. BOSTICK

JUN - 5 2012

EXAMINER

## COVER LETTER "

TO:	Registration Section Division of Corpo			•		
SUBJE	CCT:	RO TO RWORL Name of Limi	N INSTITUTE ted Liability Company	LLC		
The en	closed Articles of Ar	mendment and fee(s) are sub	omitted for filing.			
Please	return all correspond	lence concerning this matter	to the following:			
		BARB	PARA DUFFY Name of Person	<del></del>		
		_ Котокио	RID INSTITUTE Firm/Company AUREL BRANCH	,LC		
		4042 L	AUREL BRANCH	LANE		
			Address			
		ORLANDO	, FLORIDA 3	2817		
		barbara (	City/State and Zip Code  Orotorworld. Con to be used for future annual report notificati	<b>27</b>	12 J	
For fur	ther information con	cerning this matter, please c				i i
_ {	BARBARA	DUFFY	at ( <u>407)</u> 414 - 2 Area Code & Daytime Te	2019	H PH 3:	
	Name of F	erson	Area Code & Daytime Te	reprione Number	3: 53 STATE LORIDA	<b>*</b> ***********************************
Enclos	ed is a check for the	following amount:				
\$25	5.00 Filing Fee	₩\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate o Certified Co (additional c	f Status &	d)

MAILING ADDRESS: Registration Section

\

TO:

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 ORGANIZATION OF

ROTORWORLD INS	stitute LLC
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>LLL10000</u> 78.43	vere filed on \(\sum_{une}\mathbb{R}\mathbb{QO}//\sum_{candassigned}\)
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and end with the words "Limite" L.L.C."	
Enter new principal offices address, if applicable:	4042 LAUREL BRANCH LANE
(Principal office address MUST BE A STREET ADDRESS)	4042 LAUREL BRANCH LAME ORLANDO, FLORIDA 32817
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	Y042 LAURET BRANCH LANG ORLANDO, FLORIDA 32817
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here	
Name of New Registered Agent: BAK	BARA DUFFY
New Registered Office Address: 404	2 LAUREZ BRANCH CANE  Enter Florida street address
ORLAN	VDO , Florida 32817 City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Esp cour

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, Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Degistered Agent, Shanature of New Resistered Agent

Page 1 of 2

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 JEFF PONDS ☐ Add ☐ Remove ☐ Add Remove Remove \_\_\_Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated gnature of a member or authorized roppesentative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00



May 30, 2012

FLORIDA DEPARTMENT OF STATE Division of Corporations Regulatory Specialist PO BOX 6327 Tallahassee, Florida 32314

SUBJECT: ROTORWORLD INSTITUTE, LLC - Amendment

RE: L11000072436

Dear Barbara Bostick / Regulatory Specialist,

Please find enclosed the proper amended form for Rotorworld Institute, LLC, Doc #L11000072436. Thank you so very much for being so kind and mailing me the proper form to fill out with the instructions as it was very helpful.

I realize in the first set of forms I mailed in that I had typed the Doc# incorrectly, the correct document # is as above, Doc# L11000072436.

I have chose the "filing service fee and a Certificate of Status" for this document. Please mail a refund of the difference from the previous check mailed with the improper document forms, payable to Rotorworld Institute, LLC for the refund amount of \$13.75 to this mailing address:

Rotorworld Institute, LLC Barbara Duffy

4042 Laurel Branch Lane Orlando, Florida 32817

If you have any questions please feel free to call me at 407-414-2019 or email me at barbara@rotorworld.com.

Thank you,

<del>Barba</del>ra Duffv



May 16, 2012

. **1** 

BARBARA DUFFY ROTORWORLD INSTITUTE, LLC 4042 LAUREL BRANCH LANE ORLANDO, FL 32817

SUBJECT: BOSS METAL LLC Ref. Number: L11000072430

We have received your document for BOSS METAL LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The Amendment is for Rotorworld Institute, LLC, Doc #L11000072436 or Boss Metal, LLC, Doc #L11000072430

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 612A00014427

Barbara Bostick Regulatory Specialist II

www.sunbiz.org