## L11000078029

(Requestor's Name)				
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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J. BRYAN

AUG 1 5 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration So Division of Con		110		
SUBJECT:	Logette C	OMS LAC	···········	
	Name of Limit	ed Limitity Company		
	•			
The enclosed Articles of	'Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Stephanie-	I. Jones		
,	Find. Ba	Name of Person    OUV   Firm/Company		·
	23150 Fashi	on Drive Suite o	232-14 E	
	Estero, 7	7 33 928 (City/State and Zip Code	AHPS	FILEU 2:58
	adminating	bcoktourcom	tion)	AKING PERSON
For further information of	concerning this matter, please c	all•		<b>显 5</b>
(SteDha	nie Clones	at 139,240-49	33	300
Name	of Person	Area Code & Daytime T	erebnone ranniner	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee Certificate of St Certified Copy (additional copy	atus &

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 ORGANIZATION

Idlette & Jo	ones LLC
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Conference of Organization for the Organization for the Organization for Organization for this Limited Liability Conference of Organization for the Organization for Organizat	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limi</u>	ited liability company here:
NA	
The new name must be distinguishable and end with the word L.L.C."	ds "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	NA
Principal office address MUST BE A STREET ADDR	UESS) 👱 💆 👼
	5 5 5
Enter new mailing address, if applicable:	NA ME 3 III
Mailing address MAY BE A POST OFFICE BOX)	
	THE STATE OF THE S
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered office addr</li> </ol>	ered office address on our records, enter the name of the new ress here:
Name of New Registered Agent:	NA
New Registered Office Address:	VA
•	Enter Florida street address
	, Florida
	City Zip Code
low Devistance Assert's Clonetons of shandus Devistance	1 A accordin

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** ☐ Add Remove ☐ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member of authorized representative of a member Typed of printed name of signee

Page 2 of 2

Filing Fee: \$25.00