11000080790

(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



100210440931

07/29/11-01030-01E **55.00

FILED

11 JUL 29 PH 1: 44

SECRETARY OF STATE
SALLAHASSEE FLORID

J. BRYAN

AUG -1 2011

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor				
SUBJECT: 2625 RO			YAL DRIVE, LLC		
30001	<u> </u>		ted Liability Company	······································	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:	٠	i. Li
GREC			GORY A. SANOBA, ESQ. Name of Person) - -
			Name of Person	型~	م ند
T <u>H</u>			E SANOBA LAW FIRM		1
			Firm/Company	Fig. 3	C
422 S0			OUTH FLORIDA AVENUE		
		-	Address	The state of the s	
		·	•		
			REG@SANOBA.COM	<u>.</u>	
For fur	ther information of	to-mail address: (concerning this matter, please c	to be used for future annual report notifice all:	ation)	
	GREGO	ORY A. SANOBA	at \	683-5353	
	Name o	of Person	Area Code & Daytime	Telephone Number	
Enclos	ed is a check for t	he following amount:			
\$25	5.00 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		ration Section on of Corporations ox 6327	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	tions ater Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liabil	Ity Company as it now appears	on our records)
(A Florid	ity Company as it now appears of a Limited Liability Company)	M Val Tetty us.
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	ULY 13, 2011 and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the li		是是一个
		SSEE
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		756
(Principal office address MUST BE A STREET ADD	DRESS)	· ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or reg		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		·
	Enter	Florida street address
<u> </u>	·····	, 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, 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>	Address	Type of Action
MGR_	WANDA M. MELO	3047 WENTWORTH PLACE LAKELAND, FL 33810 US	✓ Add Remove
			Add
			Add
			The move
			O D Add
			T S T S S S S S S S S S S S S S S S S S
			AddRemove
D. If amend	ding any other information,	enter change(s) here: (Attach additional sheets, if ne	cessary.)
			1
Dated	JULY 15		
	Signatur	of a member or authorized representative of a member	
	2	SANOBA, ESQ. AS ATTORNEY FOR MEM	BER
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00