## L110000185018

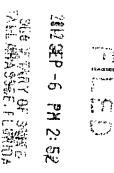
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)	_				
PICK-UP WAIT MAIL					
(Business Entity Name)	_				
(Document Number)					
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T. CLINE

SEP - 7 2012

**EXAMINER** 



August 23, 2012

JOHN LAFFERTY 656 MANOR PLACE WEST MELBOURNE, FL 32904

SUBJECT: THE SPACE COAST ROCKET JOCKEYS, L.L.C

Ref. Number: L11000085018

We have received your document for THE SPACE COAST ROCKET JOCKEYS, L.L.C and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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.

Tammi Cline Regulatory Specialist II

Letter Number: 012A00021649



## **COVER LETTER**

TO: Registration Section Division of Corporati	ons		
SUBJECT: 14 C SV	Pace Coast Locket  Name of Limited Liability Con	Jockeys	
	Name of Limited Liability Con	npany	
The enclosed Articles of Amend	dment and fee(s) are submitted for filing.		
Please return all correspondence	e concerning this matter to the following:	<b>:</b>	
·			
/ _	John CAFFE	(L)	
	Name of 1 c	13011,	
<u>//</u>	he Space coast Firm/Comp	Docket Jac	ke45
	56 manor Plac Address	e, west w	relbourne, 3904
,	int mellance	N 22011	
	City/State and Z	ip Code	
P	City/State and Z City/State and Z City/State and Z City/State and Z City/State and Z City/State and Z City/State and Z	e annual report notification)	ckeys.com
For further information concern	ing this matter, please call:		
1 1 2			
John LAFfer	$\frac{f}{\sqrt{}}$ at $(3\sqrt{})$	863 - 8108 Area Code & Daytime Telepho	- Nu-ka-
Name of Person	1 <i>P</i>	area Code & Daytime Telepho	ne Number
			•
Enclosed is a check for the follo	wing amount:	•	
\$25.00 Filing Fee \$	30.00 Filing Fee & S55.00 Fili Certificate of Status Certified (additional)		Certificate of Status & Certified Copy (additional copy is enclosed)
			4 1
MAILING A	DDRESS:	STREET/COURIER ADI	DRESS:
Registration S Division of Co	Section	Registration Section	
P.O. Box 632	7	Division of Corporations  Clifton Building	, N. C.
Tallahassee, F		2661 Executive Center Circ Tallahassee, FL 32301	le 🚆 🞖

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Space Coa  (Name of the Limited Liability Con	st Rocket Jockeys  npany as it now appears on our records.) ed Liability Company)
(A Fiorida Limit	ed Liability Company)
The Articles of Organization for this Limited Liability Comp	any were filed on 8/19/12 and assigned
Florida document numberL 1100 0085018.	
•	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and end with the words "I" "L.L.C."	Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	
Tructput Office dualess MOST DE /I STREET MODICES	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
[Mutting utuatess MAT DE AT OST OFFICE BOA]	
	Ch.
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, enter the name of the new here:
Name of New Registered Agent:	n LAFfert
New Registered Office Address: 866	Custer St NW Palm bay FL Enter Florida street address
Don I a	21907
1017	City, Florida S2 10 1 Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and co- accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in this capacity. I further agree to comply with omplete performance of my duties, and I am familiar with and as provided for in Chapler 608, F.S. Or, if this document is fice address, I hereby confirm that the limited liability

ent, 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	John Lafferty	866 Custer St NW Palm Bay FL 32907	Add Remove			
MGR	Kristen Lulewicz	957 Pied mont Ave NE Palm Bay FL 32907	Add Remove			
			Add Remove			
			Add Remove			
	<del></del>		Add Remove			
	<u>.</u> .		Add Remove			
D. If amend	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary,	TH 2: 52			
		·				
Dated —	5-30, ao	12.	<u> </u>			
	Signature of a member	or authorized representative of a member				
	Bobbi Yo	no printed name of signee				

Page 2 of 2

Filing Fee: \$25.00