

FROM metro business agency

JUL 8 2012 7:56 PM 17:56 0170253 P 1

**L11000094436**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H12000176832 3)))



H120001768323ABC/

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : METRO BUSINESS AGENCY, INC.  
Account Number : I20080000101  
Phone : (239)466-8600  
Fax Number : (239)275-0865

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: \_\_\_\_\_

2012 JUL -9 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MARYBELLA HOMES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

**T. CLINE**

JUL 10 2012

**EXAMINER**

RECEIVED

12 JUL -9 AM 6:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FROM metro business agency

(FRI) JUL 8 2012 17:56/ST. 17:56/No. 9160170253 P 2

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MARYBELLA HOMES LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**HANNA SRODA**

Name of Person

**METRO BUSINESS AGENCY INC**

Firm/Company

**4460 CLEVELAND AVE E**

Address

**FORT MYERS, FL 33901**

City/State and Zip Code

**HANNA@METROINSURANCEFL.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**HANNA SRODA**

Name of Person

at ( 239 )

**466-8600**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 JUL -9 AM 9:08

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**MARYBELLA HOMES LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/16/2011 and assigned  
Florida document number L11000094136.

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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED  
2012 JUL -9 AM 8:00  
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TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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

FROM metro business agency

(FRI) JUL 6 2012 17:57/ST. 17:58/No. 9160170253 P 4

in 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	ILSO RODRIGUES	8322 SUMNER AVE. FORT MYERS, FL 33908	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

2012  
JUL  
9  
AM  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)


Dated: JULY 6TH, 2012

Maria A. Rodriguez  
Signature of a member or authorized representative of a member

MARIA RODRIGUES

Typed or printed name of signee