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T. HAMPTON

EXAMINER

COVER LETTER

	Registration Se Division of Cor			•
SUBJEC	у <i>а</i> Т•	Sven Mart	in Properties, LLC	
SUBJEC	1.		ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please ret	urn all correspo	endence concerning this matter	r to the following:	
		<u> </u>	Mark M. Liptak	
			Name of Person	
		Sve	n Martin Properties, LLC	
			Firm/Company	·
6417 Azure Lane				
			Address	
	•	Coc	oa Beach, Florida 32931	
			City/State and Zip Code	
		E-mail address: (LBLDG@hotmail.com to be used for future annual report notif	ication)
For furthe	r information c	oncerning this matter, please of		
	.	al. B4 Paral	440	000 0045
	Name o	rk M. Liptak f Person	at (412) Area Code & Daytim	606-8845 e Telephone Number
Enclosed:	is a check for th	e 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)
	Registr	ING ADDRESS: ation Section	STREET/COURI Registration Section	on .

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

LAWOFFICES JOHN J. KABBOORD, JR.

A PROFESSIONAL ASSOCIATION TELEPHONE (381) 799-3888

SUITE 801 1980 N. ATLANTIC AVENUE COCOA BEACH, FLORIDA 88981

OF COUNSEL
F. PALMER WILLIAMS

FAX (881) 799-4499
Website: http://www.kabboord.com

ATTORNEYS

JOHN J. KABBOORD, JR.

Email: john@kabboord.com

STEPHANIE A. ESTRADA Email: stephanie@kabboord.com

August 31, 2011

Secretary of State DIVISION OF CORPORATIONS Post Office Box 6327 Tallahassee, Florida 32314

Re:

Articles of Organization for Sven Martin Properties, LLC.

Dear Sir/Madam:

Enclosed please find original Amendment to Articles of Organization for filing, together with check in the amount of \$25.00 to cover the necessary filing fees.

Your expedited assistance in filing these Articles is appreciated, and should you have any questions, please do not hesitate to contact this office.

Sincerely,

JOHN J. KABBOORD, JR.

JJKjr:dis Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 SEP - 1 AM 10: 58

Sv	<u>en Martin Pı</u>	operties, LLC	SECI	RETARY OF STATE
(Name of the Limited)	u Liability Compa A Florida Limited I	ny as it now appears Liability Company)	on our records:	HASSEE, FLORIDA
The Articles of Organization for this Limited I Florida document numberL1100009	Liability Company		•	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
The new name must be distinguishable and end w. "L.L.C."	ith the words "Limi	ted Liability Company	y," the designation ".	LLC" or the abbreviation
Enter new principal offices address, if applic	cable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 98		
		Cape Canaver	al, Florida 3292	0
B. If amending the registered agent and registered agent and/or the new registered o			r records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Mark M. Lip	tak		
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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Liptak, Milan	164 Elatan Drive Pittsburgh, PA 15243	Add Remove
<u>MGRM</u>	Liptak, Rose	164 Elatan Drive Pittsburgh, PA 15243	☐ Add ✓ Remove
MGRM	Liptak, Laura	103 Peters Drive McMurray, PA 15317	Add Remove
MGRM_	Kostkas, Martina	103 Peters Drive McMurray, PA 15317	Add ✓ Remove
MGRM_	Kostkas, Stephen	103 Peters Drive McMurray, PA 15317	Add ∕Remove
D. If amend	ling any other information, enter c	change(s) here: (Attach additional sheets, if necess	Add Remove
· —			FILE I
Dated	, , , , , , , , , , , , , , , , , , ,	Me Lytes	AM 10: 58 OF STATE E. FLORIDA
		ember or authorized representative of a member Mark M. Liptak	
]	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00