11000106975

(Re	questor's Name)	
(Ad	dress)	
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. (Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	<u> </u>
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EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

RET. NEW NETWORK 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:

Felix N Morales

Name of Person

New Network LLC

Firm/Company

2289 Boggy Creek Road

Address

Kissimmee, FL 34744

City/State and Zip Code

gc.network@hotmail.com

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

For further information concerning this matter, please call:

Felix N Morales

407.802-8909

Name of Person

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEW NETWORK LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L11000106975	were filed on SEPT. 19, 2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
BUNDDLEX LLC		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	2289 Boggy Creek Road	
(Principal office address MUST BE A STREET ADDRESS)	Kissimmee, FL 34744	Zs +
		
Enter new mailing address, if applicable:		See of See
(Mailing address MAY BE A POST OFFICE BOX)		
		147 w 2
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street o	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, 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 .	<u>Name</u>	Address	Type of Action
			Add
			[] Kelliove
			Add
			Remove
			12 Nov School Add Company Comp
			Remove 5
			Add
			- Add
			Remove

<u> </u>	
	
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November 12	2012
November 12	
November 12	Zehis Mahaha_
	ZULS MANA are of a member or authorized representative of a member
November 12 Signatu Felix N Morales	Telis Marke

Page 3 of 3

Filing Fee: \$25.00

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