

L1000140564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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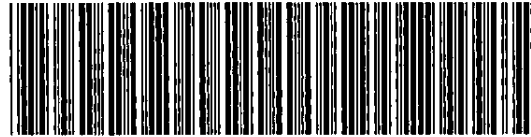
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY 16 AM 11:25

MAY 17 2012

T. HAMPTON

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: NetBBS Group 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:

Alma MUSHI

Name of Person

NetBBS Group LLC

Firm/Company

2283 Primrose lane, Apt. 2105

Address

Clearwater, Florida, 33763

City/State and Zip Code

am@netbbs-group.com

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

For further information concerning this matter, please call:

Alma MUSHI

Name of Person

at (727)

400-1921

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

NetBBS Group LLC

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

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The Articles of Organization for this Limited Liability Company were filed on 12/14/2011 and assigned
Florida document number L11000140566.

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)

33 North Garden Avenue, Suite 950

Clearwater 33755

Florida

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Alma MUSHI

New Registered Office Address:

2283 Primrose lane, Apt. 2105

Enter Florida street address

Clearwater

Florida

33763

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.

Alma Mushi
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>	<u>Address</u>	<u>Type of Action</u>
MGR	JORGE LISO, Joaquim Mar	2283 Primrose lane Apt. 2105 Clearwater, Florida 33763	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	MUSHI, Alma Mrs	2283 Primrose lane Apt. 2105 Clearwater, Florida 33763	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	MUSHI, Alma Mrs	2283 Primrose lane Apt. 2105 Clearwater, Florida 33763	<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

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

New principal address: 33 North Garden Avenue

Suite 950, Clearwater, FL, 33755

Dated Mai 14th, 2012



Signature of a member or authorized representative of a member

Alma Mushi

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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