

L12000000657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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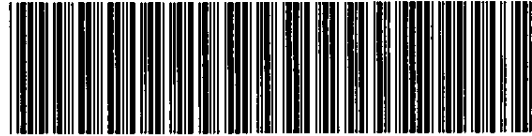
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JAN 30 2012

EXAMINER



800219717288

01/27/12--01009--016 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 27 AM 11:08

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALIDIA MONREAL LLC
Name of Limited Liability Company

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 27 AM 11:08

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

Please return all correspondence concerning this matter to the following:

KELLY MORROW

Name of Person

GOLDENPOINT LLC

Firm/Company

411 WALNUT STREET #4127

Address

GREEN COVE SPRINGS, FL. 32043

City/State and Zip Code

GOLDENPOINT@INBOX.COM

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

For further information concerning this matter, please call:

KELLY MORROW

Name of Person

at (904) 859-1622

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 27 AM 11:08

ALIDIA MONREAL 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 JAN 3, 2012 and assigned
Florida document number L12000000657.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ALIDA ALICIA MONREAL LLC

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)

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:

KELLY MORROW

New Registered Office Address:

411 WALNUT ST #4127

Enter Florida street address

GREEN COVE SPRINGS

Florida

32043

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:

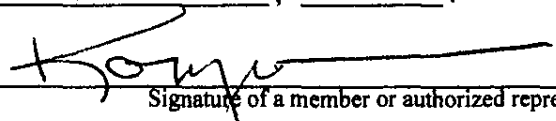
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MEM	ROBERT WAHL	411 WALNUT ST. #4127 GREEN COVE SPRINGS, FL 32043	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MEM	KELLY MORROW	411 WALNUT ST. #4127 GREEN COVE SPRINGS, FL 32043	<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

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

Dated JAN 23, 2012



Signature of a member or authorized representative of a member
KELLY MORROW

Typed or printed name of signee