## L12000010388

(Re	equestor's Name)		
(Address)			
(Ac	idress)		
(Ci	ty/State/Zip/Phone	÷#)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
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2012 NOV 19 AM 10: 02

C. LEWIS NOV 20, 2012 EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2012

LURYS ALCANTARA / G&A TAX AND ACCOUNTING 1460 E. ALTAMONTE DRIVE S-B ALTAMONTE SPRINGS, FL 32701-5046

SUBJECT: PETTY'Z CUSTOM WOOD WORK LLC

Ref. Number: L12000010388

We have received your document for PETTY'Z CUSTOM WOOD WORK LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6051.

Letter Number: 712A00025184

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: TETTY 2 (us tom Wood WORK, 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:				
Lurys Alcantara  Name of Person  GA tax Eacounting, the  Firm/Company  1460 E. Altamonte Drive 5-B  Address  Address  Alkamonte Springs F/3270/  City/State and Zip Code  E-mail address: (to be used for filture annual report notification)				
For further information concerning this matter, please call:				
Name of Person at (40 399-235)  Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
S25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  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

0	k <b>39.1</b> 8	NUV 19 AM 10: 02	
(Name of the Limited Liability Compa (A Florida Limited L	stom Wood Work  ny as it now appears on our records.  liability Company)	LLC.	
The Articles of Organization for this Limited Liability Company	were filed on $1/23/201$	2 and assigned	
Florida document number <u>L1200010388</u>	were fined on	and assigned	
- Total document number			
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 "Limi "L.L.C."	ed Liability Company," the designation "LL	.C" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
·			
		3220	
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:			
registered agent and/or the new registered onice address nero	,		
Name of New Registered Agent:	45 ALCantara		
New Registered Office Address:	1460 E Altamonte  Enter Florida street addre	Dave, S-B	
ALtamo	onte Sonno, Florida 3	3770 /	
, , , , , , , , , , , , , , , , , , , ,	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

MGR = Manager MGRM = Managing Member <u>Title</u> Name Address Type of Action ☐ Add Remove ☐ Add ☐ Remove Add Remove □Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated OCTOBER 30 2017. Signature of a member or authorized representative of a member aRRO Typed or printed name of signee

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:

Page 2 of 2

Filing Fee: \$25.00