1200012043

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

G. MCLEOD nly

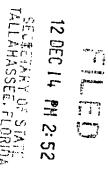
DEC 17 2012

EXAMINES



700242289607

12/14/12--01007--025 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Jose' Diaz Fastallations 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:
Margaret Diaz Name of Person
Jose Diaz Fastallations LC.
1862 Dawn DR Address
City/State and Zip Code Jaliaz 110 @ Perizon. Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Margaret Diaz at 727, 637-3579 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

,	City	, . IVI IVA	Zip Code	
		. Florida		
New Registered Office Address:	Entei	r Florida street ada	tress	<u></u>
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·			
Name of Name Desire 11.4				
registered agent and/or the new registered office address h		r records, <u>enter i</u>	ne name or	the nev
B. If amending the registered agent and/or registered	office address on ou	r records anter t	ST N	the new
			S 17 5	
(Mailing address MAY BE A POST OFFICE BOX)			Mag I	111
Enter new mailing address, if applicable:			ASS ASS	and special
	 		E B	11
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	·,	7 . 13	
Enter new principal offices address, if applicable:				
The new name must be distinguishable and end with the words "L.L.C."	imited Liability Company	," the designation "I	LLC" or the ab	breviation
A. If amending name, <u>enter the new name of the limited li</u>	iability company here:			
This amendment is submitted to amend the following:				
Florida document number L120001010.07.	3			
The Articles of Organization for this Limited Liability Compa	any were filed on <u>19</u>	711 1:00	and assig	med
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears (Ed Liability Company)	on our records.)		
Jose Diaz tasta				•

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>	Address	Type of Action
MGR4	Bryan Diaz	1802 Dawn DR Clearwater, FT. 33763	_ Add
	O	Clearwater, FT. 33763	Remove
_			
MGPM	Miguel Tuscedo	1862 Dawn DR Cleanwater, Fl. 33763	Add
		Cleanwarer, Fl. 33763	Remove
			_
4			Add
			Remove
			_
			Add
			Remove
			-
			Add
			Remove
			
<u></u>	· · · · · · · · · · · · · · · · · · ·		Add
			Remove
	·		_

. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted _	12/11,2012.
	Margaret Dias
	Signature of a member or authorized representative of a member Navada Diaz
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00