| L12000031624  |                                 |  |  |  |
|---|---------------------------------|--|--|--|
| (Requestor's Name)<br>(Address)<br>(Address)  | 600242231296                    |  |  |  |
| (City/State/Zip/Phone #)  | 12/03/12-01033-012 **25.00      |  |  |  |
| (Business Entity Name)<br>(Document Number)<br>ertified Copies Certificates of Status | <b>12</b>                       |  |  |  |
| Special Instructions to Filing Officer:   | DEC -3 AHII: 41                 |  |  |  |
| Office Use Only   |                                 |  |  |  |
|   | DEC 4 2012<br><b>T. HAMPTON</b> |  |  |  |

| COVER | LETTER |
|-------|--------|
|-------|--------|

**TO: Registration Section Division of Corporations** 

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## Craigserotica.net LLC SUBJECT:

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;

# Lucky M. Lieberman

Name of Person

Firm/Company

# 1602 Alton Road # 457

Address

# Miami Beach, FL 33139

City/State and Zip Code

luckylieberman@yahoo.com

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

For further information concerning this matter, please call:

# Lucky M. Lieberman

Name of Person

# \_ at (\_\_\_\_\_\_) 910-8302 Area Code & Daytime Telephone Number

Laclosed 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 SUGRETARY OF STATE DIVISION OF CORPORATIONS

12 DEC -3 AH 11:41

## Craigserotica.net LLC (Name of the Limited Liability)

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

| The Articles of Organization for this Limited Liability Company were filed on 3-6-2012 | _ and assigned |
|--|----------------|
| illorida document number L12000031624  |                |

This amendment is submitted to amend the following:

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

# Craigserotica LLC

The new name must be distinguishable and end with the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."

# Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Eater 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, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

| ress |
|------|
|      |
|      |
| ,    |

Ciņ

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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

## MGR = Manager MGRM = Managing Member

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| Title | Name |   | Address | Type of Action     |
|-------|------|---|---------|--------------------|
|       |      |   |         | Add                |
|       | •    |   |         | Remove             |
|       |      | • | •       |                    |
|       |      |   |         | Add                |
|       |      |   |         | Remove             |
|       |      |   |         |                    |
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|       |      |   |         | Add                |
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|       |      | - |         | Add                |
|       |      |   |         | Remove             |
|       |      |   |         |                    |

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) . ę 2012 Dated\_ Signature of a member or authorized representative of a member Lucky M. Lieberman Typed or printed name of signee Page 3 of 3

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Filing Fee: \$25.00

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DEC -3 AMII: 4 EHS