

L12000053671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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13 JUN -4 PM 12:52
CLERK OF COURT
TALLAHASSEE, FLORIDA

C. LEWIS
JUN 5 - 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IRON ORDER MC / ORLANDO CHAPTER, 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:

Daryl Smith

Name of Person

Firm/Company

502 Windrose Dr.

Address

Orlando, FL 32824

City/State and Zip Code

router915@gmail.com

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

For further information concerning this matter, please call:

Daryl Smith

Name of Person

at (407) 929-1232

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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IRON ORDER MC / ORLANDO CHAPTER, LLC

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

SECRETARY of STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/18/2012 and assigned
Florida document number L12000053671.

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)

502 Windrose Dr.

Orlando, FL 32824

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

502 Windrose Dr.

Orlando, FL 32824

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:

Daryl Smith

New Registered Office Address:

502 Windrose Dr.

Enter Florida street address

Orlando

Florida 32824

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Kevin Carter	1520 Frances	<input type="checkbox"/> Add
		Kissimmee, FL 34744	<input checked="" type="checkbox"/> Remove
MGRM	Brian Lee	1440 Meadowlark Dr	<input checked="" type="checkbox"/> Add
		Deltona, FL 32725	<input type="checkbox"/> Remove
MGRM	Chris Cornett	3248 Park Branch Ave	<input checked="" type="checkbox"/> Add
		Clermont Fl. 34711	<input type="checkbox"/> Remove
MGRM	Daryl Smith	502 Windrose Dr.	<input checked="" type="checkbox"/> Add
		Orlando, FL 32824	<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.)

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13 JUN -4 PM 12: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated May 30, 2013



Signature of a member or authorized representative of a member

Daryl Smith

Typed or printed name of signee

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Filing Fee: \$25.00