Division of Corporations **Electronic Filing Cover Sheet**

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: BLANCHARD, MERRIAM, ADEL & KIRKLAND, P.A.

Account Number : 120000000117 Phone

1 (352)732-7218

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MICRONOMICS, LLC

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J. SAULSBERRY EXAMINER

JAN 29 2013

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Micronomics, 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:

Jose H. Cortes, Jr., Esq.

Name of Person

Blanchard, Merriam, Adel & Kirkland, P.A.

Pirm/Company

P.O. Box 1869

Address

Ocala, FL 34478

City/State and Zip Code

JCortes@BMAKLaw,Com

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

For further information concerning this matter, please call:

Terri Witherspoon

 $_{\rm at}(352)/32-/210$

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filling Fee

☐\$30.00 Filing Fee & Certificate of Status

☐\$55.00 Filing Pee &
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 Tallahassec, FL 32314 STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, PL 32301

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(((H13000021313 3)))

No. 2500 P. 3/5

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Micronomics, LLC			
(Name of the Limited Liabil	Ity Company as it now appe a Limited Liability Company)	urs on our records.)	_
The Articles of Organization for this Limited Liability Florida document number L12000060011	Company were filed on M	ay 3, 2012 an	d assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company he	ere:	
Micronomix, LLC			
The new name must be distinguishable and end with the v	ords "Limited Liability Comp	any," the designation "LLC" or	the abbreviation
"L.L.C." Enter new principal offices address, if applicable:		and the state of t	2013
(Principal office address MUST BE A STREET AD)	ORESS)		E 11
	,		28
		en -	T
Enter new mailing address, if applicable:			五 元
(Malling address MAY BE A POST OFFICE BOX)			**
Training Tilliffer MAX DUTAL OD X 0121CE BOX		<u> </u>	0
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		our records, enter the nam	ae of the new
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street address	
		, Florida	
	City	Zip (Code
New Registered Agent's Signature, if changing Register	ed Agent:		
I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	and complete performance agent as provided for in C red office address, I hereb	of my duties, and I am fam Chapter 608, F.S. Or, if this c	itar with and locument is

If Changing Registered Agent, Signature of New Registered Agent

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Jan.	7 ö.	70.13	3:44PI	M

MGR = Manager

(((H13000021313 3))

No. 2500 P. 4/5

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:

MGRM -	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
	•		
		A	
			Add
			Remove
			Add
			Remove
	•		Add
			Remove
			
			ZOI3 JAN ZO Add Remove
			Remove
			8 10
			Add
		, , , , , , , , , , , , , , , , , , ,	
	·		Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated January 28 2013
Signature of a member or authorized representative of a member
Jose H. Corles, Jr., authorized representative
Typed or printed name of signee
Page 3 of 3

Filing Fee: \$25.00