

LI2000076159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

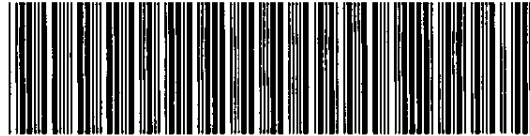
(Business Entity Name)

(Document Number)

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2015 MAY -6 PM 2:01

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAY 11 2015
J. BRUCE

COVER LETTER

**Registration Section
Division of Corporations**

SUBJECT: SRAEE FLORIDA 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:

GEORGE C DAHL
Name of Person

Firm/Company

12250 MENTA STREET SUITE 105
Address

ORLANDO, FL 32837
City/State and Zip Code

RGBOOKKEEPING@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GEORGE C DAHL 407 309-0367
Name of Person at () Area Code Daytime Telephone Number

Enclosed 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

CLERK OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SRAEE FLORIDA LLC

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

The Articles of Organization for this Limited Liability Company were filed on 06/06/2012 and assigned
Florida document number L12000076159

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 contain 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)

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
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MGR	RIZA CIMEN	173 CABARITA ROAD	☐ Add
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		CABARITA NSW 2137	☐ Remove
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	AUSTRALIA AF		☒ Change
--	--------------	--	--

MGR	FORSR PTY LTD	173 CABARITA ROAD	☐ Add
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		CABARITA NSW 2137	☒ Remove
--	--	-------------------	--

	AUSTRALIA AF		☐ Change
--	--------------	--	---------------------------------

MGRM	AEE PTY LTD	TRUSTEE FOR SRAEE CIMEN	☒ Add
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		FAMILY TRUST	☐ Remove
--	--	--------------	---------------------------------

		173 CABARITA ROAD, CABARI	☐ Change
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			☐ Add
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			☐ Remove
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			☐ Change
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			☐ Add
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			☐ Remove
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			☐ Add
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			☐ Remove
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			☐ Change
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CLERK OF COURT
FALL HASSEL FLORIDA

