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TALL SECRETARY OF STATE

B. BOSTICK

JAN 11 2013

EXAMINER

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

Alfresco Holdings 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:

Eric T. Salpeter, Esq.

Name of Person

Salpeter Gitkin, LLP

Firm/Company

200 S. Andrews Ave., Suite 503

Address

Ft. Lauderdale, FL 33301

City/State and Zip Code

simona@salpetergitkin.com

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

For further information concerning this matter, please call:

Eric T. Salpeter, Esq.

954<sub>4</sub>67-8622

Name of Person

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alfresco Holdings LLC				
(Name of the Limited (A	Liability Compai Florida Limited L	ny as it now appears on our r Liability Company)	ecords.)	
The Articles of Organization for this Limited L	iability Company	were filed on 08/23/2012	and assigned	
Florida document number L12000108641			<b>A 5 3</b>	
This amendment is submitted to amend the foll  A. If amending name, enter the new name of	_	ility company here:	TALLAMASSEE, FLORE	
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Company," the de	esignation "Leg" or the abbreviation	
Enter new principal offices address, if applic	able:	13900 Country Road	l 455, Suite 107	
(Principal office address MUST BE A STREET ADDRESS)		Clermont, FL 34711		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	13900 Country Road Clermont, FL 34711	1 455, Suite 107	
B. If amending the registered agent and/ registered agent and/or the new registered o			ds, enter the name of the new	
Name of New Registered Agent:	Alfresco Holdings LLC			
New Registered Office Address:	13900 Cou	ntry Road 455, Suite 1	07	
	Enter Florida street address			
	Clermont		Florida <u>34711</u>	
		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

Title MGR	Name William Boylan	Address  13900 Country Road 455  Suite 107  ☐ Remove
	·····	Clermont, FL 34711
<del></del>		Add
***************************************		Add  Add  Remove
<del></del>		AHASSEE, FLORIDA Remove
<del></del>		Add

If amending any oth	ier informatio	on, enter change(s) here: (Attach additional sheets, ij	(necessary.)
lanuary	a	2013	
ted January		<u></u>	
		WICH	
\A (1)\)	Signati Boylan	ture of a member or authorized representative of a membe	r

Page 3 of 3

Filing Fee: \$25.00

FILED

13 JAN 10 AM II: 35

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