## LIAMIN9973

(Re	equestor's Name)				
(Ad	ldress)				
(Ac	ldress)				
(Ci	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bi	usiness Entity Nar	me)			
(Document Number)					
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SECRETARY OF STATE TALLAHASSEE, FI ORIE

APPROVED AND FILED

D. BRUCE

OCT 31 2012

**EXAMINER** 



October 11, 2012

KRYSTNA DREWNIAK 25 ORANGE AVENUE CLIFTON, NJ 07013

SUBJECT: 4830 LOT LLC Ref. Number: L12000109973

We have received your document for 4830 LOT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 312A00025161

FILED

12 OCT 30 AM 9: 05

SECRETARY OF STATE
TALLAHASSEF FLOSIO

## COVER LETTER

то:	. Registration Se Division of Cor				•
SUBJE	CCT:	H83	O Lot LLC ed Liability Company		
		Amendment and fee(s) are sub			
		<u>Kryst</u>	~ \	•	
			Firm/Company		
		25 Or	ange Avenue		
		<u> </u>	City/State and Zip Code	3	TAL SE
For fur	ther information c	E-mail address: (to oncerning this matter, please c	o be used for future annual report notifica	ation)	FIL FIL CRETARY LAHASSE
f	Crystur Name o			-835 Telephone Number	LED AM 9: 05 YOF STATE EE. FLORIDA
Enclos	ed is a check for the	ne following amount:			-
	.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 St Certified Copy (additional copy	tatus &
	<ul> <li>Registe Division</li> <li>P.O. B</li> </ul>	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa	Lot LLC	records.)		
(A Florida Limited I	Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on August	27, 2012 and assign	ed	
Florida document number <u>L 12 000 1 0 997 3</u>	, , , , , , , , , , , , , , , , , , ,		,	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the d	esignation "LLC" or the abbi	reviation	
Enter new principal offices address, if applicable:	_ 25 Orange	Avenue		
(Principal office address MUST BE A STREET ADDRESS)	<u>cifton</u> N	5 07013	<u> </u>	
		<b>₹</b>	<del>ਨ</del>	
Enter new mailing address, if applicable:	some as ab	CRETA	API OCT :	
(Mailing address MAY BE A POST OFFICE BOX)		SSE		
		F G	AH O	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		rds, enter the name of t	vi hEnew □	
Name of New Registered Agent:	NIA			
New Registered Office Address:				
	Enter Florida street address			
· 	, Florida			
No. B. La La M. Cl	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.

f Changing Registered Agent, Signature of New Registered Agen

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** Name <u>Address</u> Type of Action -MGR Florida Foredosures TE 800 Harbour Dr Sinte 4 Naples, EC 34103 Remove Krystyna Drewniak MGR Remove Remove  $\square$ Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated\_ Krystyna Drewniak Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00