

Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6383

Ecom:

: GASSMAN & ASSOCIATES, P.A. Account Name Account Number : 075350000514 Phone : (727)442-1200 Fax Number : (727)443-5829

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

2012 DEC ີ່ທ LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAJERSKI ENTERPRISES, L.L.C. Certificate of Status 0 Certified Copy Ð C. LEWIS DEC - 6 2012 EXAMINER Page Count 01 Estimated Charge \$25.00

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OEC.	5.2012 10:19AM	GASSMAN LAW ASSOCIATES	- Print,	er Brenn	-NO. 1369 SECRETARY DIVISION OF CO	P 2 ED 2 OF STATE
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		NTERPRISES, L.L.C.				
	(<u>Nar</u>	ne of the Limited Liability Compan (A Floride Limited Li	y as it now appe ability Company	ars on our rec)	ords.)	
	rticles of Organization for a document number <u>L1</u>	or this Limited Liability Company v 2000150890	were filed on <u>1</u>	2/03/12	and a	ssigned

at fay

7:44

This amendment is submitted to amend the following:

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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)

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:	marara m ⁻¹ 481	
New Registered Office Address:	·	
	Enter F	lorida 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 608, F.S. Or, if this document is being filed to merely reflect a charge 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

Page 1 of 3

DEC. 5. 2012 10:20AM GASSMAN LAW ASSOCIATES P.A.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

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Title	Name	Address	Type of Action
MGR	DARIUSZ MAJERSKI	2410 KENT PLACE	Add
		CLEARWATER, FL 33764	4 🔽 Remove
MGR	BARBARA M. MAJERSKI	2410 KENT PLACE	🚺 Add
	•	CLEARWATER, FL 3376	4 Remove
			Add
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DEC. 5.2012 10:20AM	GASSMAN LAW ASSOCIAT	ES P.A.	NO. 1369	P. 4
D. If amending any other info	mation, enter change(s) her	e: (Attach additional sheets, i	DIVISION f necessar 2012 DEC	P. 4 FILED MARY OF STATE OF CORPORATED
				- 111 /- 41
	<u></u>			
Dated NOVEMBER 5	2012		•	
	all			_
ALANS CA	Signature of a member or autho SSMAN, Authorized	rized representative of a membe	at .	
		d name of signee		-
	Page	3 of 3		

Filing Fee: \$25.00