

L12000155893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

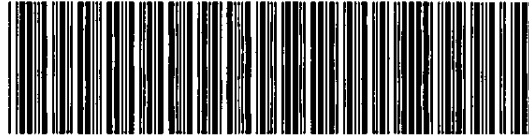
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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200269597082

03/02/15--01017--007 \*\*25.00

**EFFECTIVE DATE**  
3-2-15

**FILED**  
15 MAR -2 PM 1:20  
SOUTH FLORIDA  
TALLAHASSEE, FLORIDA

MAR 18 2015

T. BROWN

*Amend*

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 1342 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:

KEVIN A DOYLE

Name of Person

Firm/Company

1342 S POWERLINE RD

Address

DEERFIELD BEACH FL 33442

City/State and Zip Code

RENE@FPMFL.COM

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

For further information concerning this matter, please call:

RENE VALDEZ

954 571-8550  
at ( )

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

EFFECTIVE DATE  
3-2-15

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

1342 HOLDINGS, 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 12/13/2012 and assigned  
Florida document number L12000155893.

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 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)

1342 S POWERLINE RD

DEERFIELD BEACH, FL 33442

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1342 S POWERLINE RD

DEERFIELD BEACH, FL 33442

**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:

KEVIN A DOYLE

New Registered Office Address:

1342 S POWERLINE RD

*Enter Florida street address*

DEERFIELD BEACH

*City*

Florida 33442

*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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Johnson, Bruce R	2731 NE 36TH STREET	<input type="checkbox"/> Add
		LIGHTHOUSE POINT, FL 33064	<input checked="" type="checkbox"/> Remove
MGR	KEVIN A DOYLE	1342 S POWERLINE RD	<input checked="" type="checkbox"/> Add
		DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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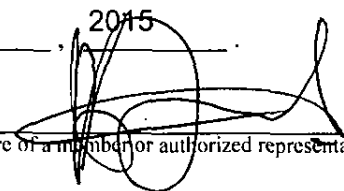
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**E. Effective date, if other than the date of filing:** 3/2/2015 **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated FEBRUARY 26

2015

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

KEVIN A DOYLE

\_\_\_\_\_  
Typed or printed name of signee