

# L 12000160772

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K. SALY  
EXAMINER  
FEB 26 2013

JAMES R. MONROE  
ATTORNEY AT LAW

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P.O. Box 41355  
Des Moines, Iowa 50311  
(515) 244-0652 FAX (515) 244-3579

P.O. Box 7158  
Ft. Myers, Florida 33919  
(239) 822-8833

Please reply to Des Moines office ■

□ Please reply to Ft. Myers office

February 19, 2013

Registration Section  
Division of Corporations  
P.O. Box 5327  
Tallahassee, FL 32314

Re: Ryvor Hospex, LLC

Dear Sir or Madam:

Enclosed please find the coverletter and Articles of Amendment to Articles of Organization of Ryvor Hospex, LLC which we request you file in your office. Also enclosed please find my check in the sum of \$25.00 representing the filing fee.

Please confirm receipt and date of filing by returning a filed copy to my office in the self-addressed stamped envelope enclosed for your convenience. If you need additional information please give me a call. Thank you.

Very truly yours,



James R. Monroe

JRM/ash  
Enc.

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Ryvor Hospex, 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:

**James R. Monroe**

Name of Person

**James R. Monroe Law Firm**

Firm/Company

**P.O. Box 41355**

Address

**Des Moines/Iowa 50311**

City/State and Zip Code

**jamemonroe@mchsi.com**

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

For further information concerning this matter, please call:

**James R. Monroe**

Name of Person

at ( **515** ) **244-0652**

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**

FILED  
13 FEB 25 PM 4: 29  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Ryvor Hospex, 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 December 27, 2012 and assigned  
Florida document number L12000160772.

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)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Ryvor Group LLC	1905 Dana Drive	<input type="checkbox"/> Add
		Fort Myers, FL 33907	<input checked="" type="checkbox"/> Remove
MGRM	United Hospitality Solutions, LLC	1905 Dana Drive	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33907	<input type="checkbox"/> Remove
MGRM	Christine Jennifer Yontz-Orlando	1905 Dana Drive	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33907	<input type="checkbox"/> Remove
MGRM	Marc Orlando	1905 Dana Drive	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33907	<input type="checkbox"/> Remove
MGRM	Mariclaire LaForte	1905 Dana Drive	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33907	<input type="checkbox"/> Remove
MGRM	Hugo Vargas	1905 Dana Drive	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33907	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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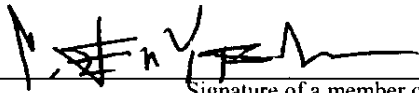
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Dated 12/31, 2012.



Signature of a member or authorized representative of a member

Christine Jennifer Yontz-Orlando

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**