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J. SAULSBERRY EXAMINER FEB 14 2013

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

PAPAYA SPA 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:

PERRY A MASHBURN

Name of Person

Firm/Company

125 INLET WAY STE 1

Address

SINGER ISLAND, FL 33404

City/State and Zip Code

ADMIRAL1944@YAHOO.COM

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

For further information concerning this matter, please call:

PERRY A MASHBURN

_{at (}561₎876-5612

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

PAPAYA SPA LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on ou a Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability	Company were filed on 01/24/20	and assigned
Florida document number <u>L13000012265</u>		
This amendment is submitted to amend the following:	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) es of Organization for this Limited Liability Company were filed on 01/24/2013	
A. If amending name, enter the new name of the lin	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) ration for this Limited Liability Company were filed on 01/24/2013 and assigned ber L13000012265 mitted to amend the following: , enter the new name of the limited liability company here: istinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation ffices address, if applicable: ss MUST BE A STREET ADDRESS) dress, if applicable: BEA POST OFFICE BOX) registered agent and/or registered office address on our records, enter the name of the new or the new registered office address here: Registered Agent: and assigned out 124/2013 and assigned and assigned out 24/2013 out 24/2013 and assigned out 24/2013 out 24/2013 out 24/2013 out 24/2013 out 24/2013 out 24/2013 out 24/2	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	DRESS)	
		\$ 5 E
Enter new mailing address, if applicable:		Trico B
(Mailing address MAY BE A POST OFFICE BOX)	ng address, if applicable: MAY BE A POST OFFICE BOX)	
		
		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flore	ida street address
		,
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	DONALD H. LEE	145 CHESTNUT ST	Add
		LEONIA, NJ 07605	Remove
			Add
			Remove
			Add
			A Add 5 55
			Remove
			Add
			Remove
			Add
			Remove

. If amending a	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
, 	
	·
ated FEBRU	JARY 10) 2013
	King Willen
	Signature of a member or authorized representative of a member
PE	RŔY A MASHBURN /
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00