L13000027814

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FEB 28 2013 J. BRYAN

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Vainn Agency, 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:

Eddy F. Murphy JR

Name of Person

Vainn Agency, LLC

Firm/Company

11400 4th St. North Apt#804

Address

St. Petersburg, FL 33716

City/State and Zip Code

eddy@vainnagency.com

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

For further information concerning this matter, please call:

Eddy F. Murphy JR

216 820-3237

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

MISTER 27 MILINASSEE, FLOMBA

Vainn Agency, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

00/00/0040

The Articles of Organization for this Limited Liabi	lity Company were filed on U2/22/2013	and assigned
Florida document number L13000027814	 •	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	<u>.</u>
B. If amending the registered agent and/or registered agent and/or the new registered office		iter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	et address
-	, Floric	ta
	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>	Address	Type of Action
MGRM	Eddy F. Murphy JR	11400 4th St. North	Add
		Apt# 804	Remove
		St. Petersburg, FL 337	16
			Add
			Remove
The state of the s	41		SHOOTE Add
			E STATE
			Add
			Remove
			Add
			Remove
			Add
			Remove

If amending any other information, ent	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.), ,		
February 25	2013		
Plan Kalat	7 ·		
4	a member or authorized representative of a member		
Eddy F. Murphy JR			
**************************************	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00

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