# 11300004890

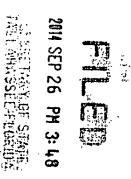
 (Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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### **COVER LETTER**

TO: Registration Section

Division of Corporations

SUBJECT:

# Melbourne Australia 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:

Roman V. Hammes, Esq.

Name of Person

Roman V. Hammes, P.L.

Firm/Company

250 East Colonial Drive, Suite 305

Address

Orlando, FL 32801

City/State and Zip Code

roman@romanvhammes.com

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

For further information concerning this matter, please call:

Roman V. Hammes

...407、650-0003

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)

例

### **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

Melbourne Australia Hold						
(Name of the Lim	ited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited I Florida document number L13000064890	Liability Company	were filed on May 2, 2013	an	ıd assi	gned	
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name	of the limited liab	oility company here:				
The new name must be distinguishable and end with the	words "Limited Liab	pility Company," the designation "LLC"	or the abbrevia	tion "L.	L.C."	
Enter new principal offices address, if applicable:		2106 N. Orange Ave., Suite 200				
(Principal office address MUST BE A STRE	ET ADDRESS)	Orlando, FL 32804				
			2415	22		
		<u> </u>	17.00	3S		
Enter new mailing address, if applicable:				2		
(Mailing address MAY BE A POST OFFICE	C ROX)			ज		
	<u> </u>		- 17 TO	<u> </u>		
			- <del>- 35</del>	<del>-</del> ::-	Tarana.	
B. If amending the registered agent and			enter the na	11 <del>6</del> 0	f the nev	
registered agent and/or the new registered of	office address her	<u>e</u> :				
Name of New Registered Agent:	Timothy F.	Majors			<u> </u>	
New Registered Office Address:	2106 N. Or	106 N. Orange Ave., Suite 200				
		Enter Florida street address	· <del></del>	<del></del>		
	Orlando					
		City		Code		
New Registered Agent's Signature, if changing	Registered Agent:					
I hereby accept the appointment as register, provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as p registered office	performance of my duties, and provided for in Chapter 605, F.S.	I am familia S. Or, if this	r with docun	and nent is	
	If Char	nging Registered Agent, Signature of N	lew 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 **Type of Action** <u>Address</u> **Title Name** Timothy F. Majors 2106 N. Orange Ave., Suite 200 MGR/AMBR Orlando, FL 32801 □ Remove 13990 CE 455, Suite 107 Vincent B. Soulsby **MGRM** Clermont, FL 34711 ■ Remove ☐ Add ☐ Remove ☐ Remove □ Add \_□ Remove

		1	
he effective date must be specific, cannot be prior	to date of receipt or filed date	and cannot be more	(optional)
Effective date, if other than the date of the effective date must be specific, cannot be prior the date this document is filed by the Florida Department September 24	to date of receipt or filed date urtment of State)	and cannot be more	(optional) than 90 days after
he effective date must be specific, cannot be prior he date this document is filed by the Florida Depa Dated September 24	to date of receipt or filed date urtment of State)		than 90 days after

Page 3 of 3

Filing Fee: \$25.00

