

## L13000067964

(Re	equestor's Name)	
(Ad	ldress)	
•	idress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	usiness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer	
		Δ
	Office Use Only	m A

B. KOHR



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06/06/13--01007--018 \*\*25.00



## **COVER LETTER**

TO: Registration Sec Division of Corp	ction porations		چانلار ا
subject: <u>Brok</u>	<del> </del>	ly, LCC	
	Name of Limite	ed Liability Company	
			707
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Venin	- Burlan	<del></del>
		Name of Person	
	Boke	S Real Peally Firm/Company	
	8931 (	onterence Dr + 6	
	E-mail address: (10	City/State and Zip Code  C Keyin Say ton. 18  De used for future annual report notification.	3919 -P
For further information co	oncerning this matter, please ca	all:	
1/0	\$ 0		·n
Name o	f Person	at 239 322 - 55 Area Code & Daytime Te	elephone Number
Name	reson	Alea code de Dayante re	Aspirole (Allies)
Enclosed is a check for the	ne 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

ORGANIZATION	
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2	
office address on our records	, enter the name of the new
Futar Florida	street address
Enter Florida's	meer aaaress
	orida Zip Code
	Deally UC  Ipany as it now appears on our reced Liability Company)  any were filed on  iability company here:  imited Liability Company," the designated Liability Company, and the designation of the desi

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 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 = Managing Member

Title Name Address Type of Action

MGR = Managing Member

Title Name St31 (anderse De to Add

Forthurs R 35719 Remove

Add

Remove

Add

Remove

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. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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-	
ited	6-4,2013,
	M. S.
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00