## L13000068956

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Town OCT 28 2013

## **COVER LETTER**

TO: Registration S Division of Co			· .
SUBJECT:	BURGUN	DEE, LLC	
SUBJECT.	Name of Limit	ed Liability Company	-
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Rebecc	Name of Person	
	BURG	SUNDEE, LLC	
		Firm/Company	
	3125 N.	Wastington St	zeet #133
	1	Address	
	Zellwood	1, FL 32798	
		City/State and Zip Code  Ode LLC CGF	1Ail. Com
		o be used for future annual report notificati	
For further information	concerning this matter, please co	all:	
Reber	cca D'Elia	at (201) 486-	0186
Name	of Person	Area Code & Daytime Te	lephone 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

BURGUN	DEE, LLC
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L130006895</u> 6	y were filed on $5/7/2013$ and assigned
This amendment is submitted to amend the following:	TALLAN
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and end with the words "Lim" L.L.C."	ited Liability Company," the designation LLC" the abbreviation
Enter new principal offices address, if applicable:	57
(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 o 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 Zin 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 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>	Name	Address	Type of Action
MGR	DAVID A. BALLINGER, JR	3125 N. Washington St, #133 Zellwood, FL 32798	Add
		Zellwood, FL 32798	Remove
			_
<del></del>			Add
			Remove
		<u> </u>	<b>3</b> <b>1</b> ⊤
		LW C	≥
		FLORIDA	Remove
			-
	*** <u> </u>		Add
			Remove
			_
			_ Add
			Remove
			_
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			Remove
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am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
,	
	October 14, 2013.
	Phistian
	Signature of a member or authorized representative of a member
	Rebecca D'Elia
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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