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PICK-UP	☐ WAIT	MAIL
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B. BOSTICK

JUL - 8 2013

**EXAMINER** 

## **COVER LETTER**

TO: Registration Se Division of Con					
SUBJECT: (JO)	en Machine L Name of Limit	した Cled Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Myriam	PESQUEIQ Name of Person			
		Firm/Company			
	1455 martin	IQUE COURT Apt 650	]8		
	<u> </u>	City/State and Zip Code	<u>-</u>	T. 2	
	MPSQUERO 2 E-mail address: (1	OOZ CYANO. COM o be used for future annual report notificat	ion)	ZOIB JUL -5 SECRE INVO ALLAHASSI	. m
For further information of	concerning this matter, please c	all:			,,,,,,
FYNESTO SC Name o	hwenburger of Person	at (954) 505 9 : Area Code & Daytime T	2 89 elephone Number	**************************************	
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	losed)

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

Golden Macnine	LLC				
(Name of the Limited Liabilit (A Florida	y Company as it now appe Limited Liability Company	ears on our records.)			
The Articles of Organization for this Limited Liability Florida document number <u>U30007293</u>	Company were filed on _ 	5-11-13	_	and ass	signed
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability company h	ere:			
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Com	pany," the designation	n "LLC	or the	abbreviation
Enter new principal offices address, if applicable:			Z AL	20	
(Principal office address MUST BE A STREET ADD	RESS)		CKI LAI	ی	<del>Later</del> series
		·	353	<u>;=</u> ;	
			SEC.	വ	* *****
Enter new mailing address, if applicable:			二	3	1 ± 1
(Mailing address MAY BE A POST OFFICE BOX)			<u>85.</u>	- t-	
	- <del></del>		*	8	
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		our records, <u>ent</u>	er the	name (	of the new
Name of New Registered Agent:					
New Registered Office Address:			<del></del>		
		Enter Florida street	addres:	5	
		, Florida		71 (7) 7	
	City		2	Zip Cod	e

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>	<u>Name</u>	Address	Type of Action
MM	Al ejandro Schweinburger	1455 martinique Court	Add
	,	Apt 6508 Weston FL	Remove
		33326	
			Remove
			Add
		L CRE	Remove
		SON (F. C.)	- 5 F
		FLORIT	Add
		tu	Remove
			_
	To Aller Ma		Add
			Remove
			_
			Add
			_ Remove
			_

. if amending any	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
nted	· · · · · · · · · · · · · · · · · · ·
	Angle Schwenby (Ger Signature of a member or authorized representative of a member
	Andrea Sawenbyraer Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00