# L13000078885

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SECRETARY OF STATE ALLAHASSEE, FLORIDA FILED

JUL 1 6 2013 J. BRYAN

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	MARY GENE Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	超量力
Please return all correspo	ondence concerning this matter	to the following:	
	EU6€n	Name of Person	TALLED IN STATE
	<u>many</u>	GCME CLC Firm/Company	٠, ١
	7961 CM	Address	74
	WEST /	City/State and Zip Code    Compared to the content of the content	= 23415
	E-mail address: (t	o be used for future annual report notificati	eart. ne t
For further information of	concerning this matter, please co	all:	
Collect Name of	SAL(MNO)  SPerson	at (561) S > 5 Area Code & Daytime Te	2 - 4 7 3 3 lephone 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)	□\$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

LLC.	
Company as it now appears of mited Liability Company)	on our records.
mpany were filed on The	10 <sup>th</sup> 20/3 and assigned
5	
ed liability company here:	
s "Limited Liability Company	," the designation "LLC" or the abbreviatio
	T S
<u> </u>	
	SSEE. FLOOR
	DE TO
red office address on ou	r records, enter the name of the ney
Enter	r Florida street address
City	, Florida Zip Code
	Enter  Company as it now appears mited Liability Company)  Impany were filed on   Company were filed o

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	ROBERT SALERNO	Address 2991 SHAUGHNESSY MR. WELLINGTON, FL 3742	Add
			Remove
		ALL	Remove
			Add Remove  Remove  Add  Add  Add  Add  Add  Add
		<del> </del>	Remove
			Remove
	·		
			Add
		<del></del>	
			Add

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	<del></del>
Dated	Signature of a member or authorized representative of a member
	Soul for
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

