# 13000088460

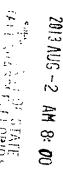
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J. SAULSBERRY EXAMINER AUG 06 2013

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Advanced Fre Companies, 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:
Wark 3. Wich Name of Person
Berson, Mucci and Wess PL
3361 N. University Dive, Sk. 102
Oxal Springs = 33067
E-maraddress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Mark Hurci at (974) 323-1023 & Area Code & Daytime Telephone Number 300 &
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed)  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

Name of the Limited Liability Company (A Florida Limited Liability Company)	nas it now appears on our record (bility Company)	<u>.</u>
The Articles of Organization for this Limited Liability Company v	vere filed on 06/19/20	3 and assigned
Florida document number <u>L13</u> 00088460	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
NIA		
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	NIA	20
(Principal office address MUST BE A STREET ADDRESS)		2
		5, 5
	_	2 t
Enter new mailing address, if applicable:	NIA	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:		nter the name of the new
Name of New Registered Agent:	NA	
New Registered Office Address:	****	
	Enter Florida stre	eet address
	, Flori	da
	City	Zip 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 Changing Registered Agent, Signature of New Registered Agent

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 Title Type of Action Name Address HORM Rode, Eric 2780 Gaeway Drive Add Pom Pano Brach Fi 384 DRemove Remove 2780 Gateway Dive DAdd HBRM Rode, Eric temporo Beach, Fr 33069[ Remove; Remove Remove

D. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	N,A
_	
_	
-	
Dated -	
	MSM=
	Signature of a member or authorized representative of a member  Hark S. Hucci, Authorized Rep of Hember, Eric Rode
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

2013 AUG -2 AK 8: 00