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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: Florid	a(No g ĥes, LLC 🔑			
. —	lane of Limited Liability Company			
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.			
Please return all correspon	idence concerning this matter to the following:			
	Todd I Stern			
····	Florida Normes, LLC			
	Firm/Company			
	14590 Grande Cay Circle #2606			
	Address			
	Fort Myers, Fl 33908			
	City/State and Zip Code	/ 35/1		
	todd.stern@gmail.com E-mail address: (to be used for future annual report notification)	. Ann	ÇÜ:	
For further information co	ncerning this matter, please call:	1 C. T.	13 OC1	£.1 *
	•	ただ。		4. a. 6. - 15, - 4
Todd Stern	248 ₎ 7550191	17 4.	7 ;	Çarie. F
Name of Enclosed is a check for the			1:52	기 (* 기준) 기준)
		Ľ. · · · · · ·		
\$25.00 Filing Fee	(additional copy is enclosed) Certified	ate of Statu		sed)

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 (A Florida L	Company as it now appears on our recimited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co. Florida document number 113000107135	ompany were filed on 7/30/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company," the desi	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
		A THE STREET
Enter new mailing address, if applicable:		ें ए के स्थ
(Mailing address MAY BE A POST OFFICE BOX)		pilitar at 122 mary
		5.7 图形 5.2
B. If amending the registered agent and/or registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:		
	City, FI	lorida 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 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** <u>Name</u> **Address Type of Action** FINANCIAC Robert E Mayer 16157 Mount Abbey Way MGR**M** #202 Remove Fort Myers Florida 33957 Remove Remove Remove

D. If amending any other infor	nation, enter change(s) here: (Attach additional sheets, if necessary.)	
<u></u> .		
•		
1		
-		
_{Dated} October 9	2013	
	98/	
	Signature of almember or authorized representative of a member	
Todd I Stern		
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00