L13000 110981

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SECKETARY OF STATE
TALLAHASSEE ELODINA

SEP 1 0 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBTRCT.

Pur Gene 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:

SERA Z SUNGU

Name of Person

Firm/Company

1208 MARINE WAY APT. A-403

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

serazeynep@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SERA Z SUNGU

, 561 **762-944**4

Name of Person

Area Code & Daytime Telephone 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

Pur Gene LLC		E Will W
	ty Company as it now appears on our records. a Limited Liability Company)	SE S
The Articles of Organization for this Limited Liability	Company were filed on 08/06/2013	and assigned
Florida document number L13000110981	·	当の
		ORID TATE
This amendment is submitted to amend the following:		9 A
A. If amending name, enter the new name of the lir	mited liability company here:	
Purgene LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	<u></u>
	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ter the name of the nev
	-	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
<u></u>	, Florid	
	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				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
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			Remove	
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. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	Aug 20, 2013.
	(1 C) ()
	Men E Just
	Signature of a member of authorized representative of a member SUNGU, SERA Z
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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