

L13 000155071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

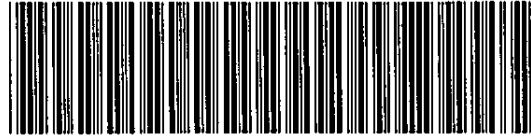
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Mivati, L.L.C.  
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:

Thomas A. O'Rourke

Name of Person

Bodner & O'Rourke, LLP

Firm/Company

425 Broadhollow Road, Suite 120

Address

Melville, New York 11747

City/State and Zip Code

torourke@bodnerorourke.com

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

For further information concerning this matter, please call:

Thomas A. O'Rourke

Name of Person

at 631 249-7500

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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TALLAHASSEE, FLORIDA

**BODNER & O'ROURKE, L.L.P.**

ATTORNEYS AT LAW  
425 BROADHOLLOW ROAD  
SUITE 120  
MELVILLE, NY 11747  
TELEPHONE: (631) 249-7500  
FACSIMILE: (631) 249-4508

THOMAS A. O'ROURKE  
GERALD T. BODNER

EMAIL  
TOROURKE@BODNEROROURKE.COM

November 19, 2013

**By Federal Express  
8764 6318 2623**

Florida Department of State  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Articles of Amendment to Articles of Organization of  
Entity Name: **Mivati L.L.C.**  
Filing Date: November 4, 2013  
Florida Document No.: L13000155071

To Whom It May Concern:

Enclosed please find an Amendment to the name of the Limited Liability Company named Mivati L.L.C. to the new name My-Vati L.L.C.

Also enclosed is a check in the amount of \$55.00 payable to the Florida Department of State representing payment of the Filing fee and a Certified Copy.

If you have any questions or require further information, I may be reached at 631-249-7500.

Please send the letter of acknowledgment after the amendment has been filed to the above address.

Sincerely yours,



Thomas A. O'Rourke

TAO/cd  
Encs.

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Mivati L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on November 4, 2013 and assigned  
Florida document number L13000155071.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

My-Vati L.L.C.

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, Florida

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

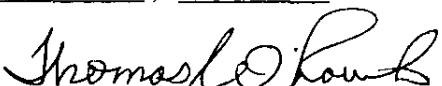
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u>           |
|--------------|-------------|----------------|---------------------------------|
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated November 19, 2013



Signature of a member or authorized representative of a member

Thomas A. O'Rourke

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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JULIA ROBERTS