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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 10, 2014

MARTIN CAMPOS
3407 48TH ST W
BRADENTON, FL 34209

SUBJECT: THE PROJECT ELIMINATOR LLC
Ref. Number: L13000162621

We have received your document for THE PROJECT ELIMINATOR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 114A00001028



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 15, 2014

MARTIN CAMPOS
3407 48TH ST W
BRADENTON, FL 34209

SUBJECT: THE PROJECT ELIMINATOR LLC
Ref. Number: L13000162621

We have received your document for THE PROJECT ELIMINATOR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 114A00001028

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Project Eliminator 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:

Martin Campos
Name of Person
The Project Eliminator LLC
Firm/Company
3407 48th St. W.
Address
Bradenton, FL 34209
City/State and Zip Code

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

For further information concerning this matter, please call:

Martin Campos at (941) 773-1962
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

The Project Eliminator LLC.

(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 11-20-13 and assigned
Florida document number L13000162621.

This amendment is submitted to amend the following:

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

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 605, 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 M or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Campos, Martin II	3407 48th St. W.	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34209	<input type="checkbox"/> Remove
MGR	Campos, Jacob	3407 48th St. W.	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34209	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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FALCON

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated 1-09-14



Signature of a member or authorized representative of a member
Martin Campos

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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