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SECRETARY OF STATE TALLAHASSEE FEORION

DEC 17 2013

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

OC FLASHDANCERS, 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:

THOMAS C. LITTLE, ESQUIRE

Name of Person

THOMAS C. LITTLE, P.A.

Firm/Company

2123 N.E. COACHMAN RD., #A

Address

CLEARWATER, FL 33765

City/State and Zip Code

wrbt@bellsouth.net

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

For further information concerning this matter, please call:

Tom Little

<sub>3,7</sub>727,443-5773

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

OC FLASHDANCER'S, LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records. Liability Company)	)
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000168298</u> .	were filed on12/5/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2201 S. ORANGE BLOSS	OM TRAIL
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32805	2013
Enter new mailing address, if applicable:	2201 S. ORANGE BLOSS	THE STATE OF THE S
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32805	7 7 m
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new
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 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
MGMR	WILLIAM SIERER		Add
			Remove
			Add
			Remove
			Add
			Remove
			Agric TAAY FALLI AHASSE
			Remove  ASSEE FLORIDA  Add
			Add  Remove
			Add Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated DECEMBER 13, 2013
fonst Mitte Edgine
Signature of a member or authorized representative of a member
THOMAS C. LITTLE, ESQUIRE
Typed or printed name of signee

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Filing Fee: \$25.00

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