L13000172498

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200255150632

01/02/14--01008--025 **30.00



N. Cumsun JAN - 8 2044

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	7000 - 101	erprise LLC	
,	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence	ondence concerning this matter t	to the following:	
	Ma	Name of Person.	(
		Name of Person.	
	MD1	_ Enterpris	e Lle
	,	Firm/Company	
	770	5 High Pin	es DN
	1	Address	
	NG	ples, FL 31	-f103
	\	City/State and Zip Code: CKEY HESSAZO	1 al arres a
	E-mail address: (6	to be used for future annual report notifi	ication):
For firther information a	concerning this matter, please ca	-	 - -
U	araplicket	0	-0953-
Name (of Person	Area Code: Daytime	Telephone Number
Enclosed is a check for t	the following amount:		
□: \$25.00 Filing Fee.	29530.00 Filing Fee & . Certificate of Status	Certified Copy (additional copy is enclosed)	ElS60.00 Filing Fee; Certificate of Status & Certified Copy

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle:
Tallahassee, FL 32301

December 30, 2013

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

To whom it may concern:

A mistake was made on my part when filing my new Florida LLC. I misinterpreted the registered agent section with the managing members portion. I would like to remove the 2 members I currently have on form & add just my name, as I am the sole owner. I'm allowing 2 others to have signing authorization at the bank on my behalf, but they are not owners (managing members). I found out this difference in verbage when trying to open a new bank account. If you could please expedite these changes as quickly as possible, I would greatly appreciate it. Please email me when form is ready to be printed.

Thanks you so much in advance for your expedited response.

Sincerely,

Marcy Lickel, owner

MDL Enterprise LLC - L13000172498

775 High Pines Dr

Naples, FL 34103

262-305-0952

tuckertessa2@yahoo.com

ARTICLES OF AMENDMENT TO

FILED

ARTICLES OF ORGANIZATION

2014 JAN -2 PM 12: 05 SEGRETARY OF STATE

TAPLAHASSEE, FLORIDA

MDL Enterprise LLTALAHASSEE, FLORIDA
(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 12-13-13 and assigned Florida document number: L 13000172498
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 "LLC."
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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code.

If amending the Managers 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 = Mar AMBR = Aut	nager horized Member		
<u>Title</u>	Name.	Address	Type of Action
MGRM	Daniel W. Lickel	775 High Pines Dr	Add:
,		175 High Pines Dr Naples, FL 34103	Remove
			
MGRM	Martin R. Miller	775 High Pines Dr. Naples, FL 34103	Add!
		Noples, FL 34103	Remove:
MGR	Marcy L. Lickel	775 High Pines Dr	Add
	7	Naples, FL 34103	Remove:
			
			Add.
			Remove:
			Add .
			Remove
			n
			Remove:

e date is listed, the date must be specific and cannot be more than 90 days after filing.) (6		
e date is listed, the date must be specific and cannot be more than 90 days after filing.) (6		***************************************
e date is listed, the date must be specific and cannot be more than 90 days after filing.) (6		
e date is listed, the date must be specific and cannot be more than 90 days after filing.) (6		·
e date is listed, the date must be specific and cannot be more than 90 days after filing.) (6		
e date is listed, the date must be specific and cannot be more than 90 days after filing.) (6		
December 30, 2013.		
(March)	late, if other than the date of filing:	days after filing) (60
Simplify of a member of a member	e date is listed, the date must be specific and cannot be more than 90	
Signature of a member or authorized representative of a member	e date is listed, the date must be specific and cannot be more than 90	
Digitalist vi a likalisti vi auuksikat itjattaalisti vi a likalisti.	e date is listed, the date must be specific and cannot be more than 90	
	date is listed, the date must be specific and cannot be more than 90	days after filing.) (60

Filing Fee: \$25.00

FILED 2014 JAN -2 PM 12: 05 SELEMIASSEE FLORIDA