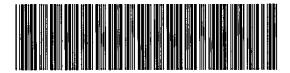
# L14000001447

(Requestor's Name)	
(Address)	—
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	

Office Use Only



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J. STRONGE JAN 15 2013.



### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

## LYONESS PRESIDENT 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:

MATJAZ FERK

Name of Person

LYONESS PRESIDENT LLC

Firm/Company

3500 GALT OCEAN DR #507

Address

FT LAUDERDALE, FL 33308

City/State and Zip Code

matjaz.lyoness @gmail.com

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

For further information concerning this matter, please call:

MATT FERK

\_at (646) 662-7303

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

( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on a Limited Liability Company)	our records.	
The Articles of Organization for this Limited Liability Florida document number <u>L14000001447</u>	Company were filed on 01/02/2	2014	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the list	mited liability company here:		
MATT TEAM LLC			
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Company,"	the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)	Eco	
			armin .
		374 745	
Enter new mailing address, if applicable:			(A)
(Mailing address MAY BE A POST OFFICE BOX)	-		2.3
			in the
		Cana ar	<u> </u>
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad  Name of New Registered Agent:		records, <u>enter th</u>	e name of the new
Name of New Registered Agent.			
New Registered Office Address:	Enter Fi	lorida street addres	SS
		, Florida	
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

LYONESS PRESIDENT LLC

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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.

<u>itle</u>	<u>Name</u>	Address	Type of Acti
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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or

D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	· · · · · · · · · · · · · · · · · · ·
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E. Effective of (If an effective	late, if other than the date of filing: (optional) e date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b
Dated	· · · · · · · · · · · · · · · · · · ·
	Signature of a member or authorized representative of a member
<b>3</b>	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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E. Effective (If an effect	date, if other than the date of filing: (optional) we date is listed, the date must be specific and cannot be more than 90 days after filing.) (60)	5,0207 (3)(b
E. Effective (If an effection of the Effection of the Effection of the Effective III)	date, if other than the date of filing:	5,0207 (3)(b
(If an effect	date is listed, the date must be specific and cannot be more than 90 days after filing.) (60: $\frac{1/9/14}{1/9/14}$	5.0207 (3)(b
(If an effect	date, if other than the date of filing:	5.0207 (3)(b

Page 3 of 3

Filing Fee: \$25.00

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