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(Document Number)
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02/24/14--01026--005 **25.00





February 25, 2014

MONICA DIAZ 355 ALHAMBRA CIRCLE 1100 CORAL GABLES, FL 33134

SUBJECT: PURDY SLIP LLC Ref. Number: L14000003299

We have received your document for PURDY SLIP 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):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 914A00004139

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Registration Section **Division of Corporations**

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Purdy Slip 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:

MONICA DIAZ

MOORE & CO.,P.A
Firm/Company

355 ALHAMBRA CIRCLE, 1100

CORAL GABLES, FL 33134

City/State and Zip Code

MDIAZ@MOORE-AND-CO.COM

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

For further information concerning this matter, please call:

Name of Person

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

Purdy Slip LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) odity Company)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L14000003299</u> .	ere filed on JANUARY 7, 2014 an	nd assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	ty company here:	
Slip105/106, LLC		
The new name must be distinguishable and end with the words "Limited Liabilit	y Company," the designation "LLC" or the abbrevia	ition "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	÷!
(Principal office address MUST BE A STREET ADDRESS)		
	3	20
	·	် င်
Enter new mailing address, if applicable:	, .	en eng
(Mailing address MAY BE A POST OFFICE BOX)		- 3
•		ੁੱ ਹੈ।
	(A)	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter the r	iame of the ne
Name of New Registered Agent:		•
Name Dominton d Office Address.		
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 provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been posified in writing of this above.	erformance of my duties, and I am famili covided for in Chapter 605, F.S. Or, if thi address, I hereby confirm that the limited	iar with and s document is

If Changing Registered Agent, Signature of New Registered Agent

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:

<u> Citle</u>	Name	Address	Type of Action
			Add
			□ Remove
		g	□ Add
		☐ Remove	
			□ Add
	***************************************	□ Remove	
			Add
		□ Remove	
***************************************		***************************************	
			□ Remove
			Add
			☐ Remove

. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
 	
Effective da (The effective the date this d	ate, if other than the date of filing:
Dated	- Anh
-	Signature of a member or authorized representative of a member
-	Typed or printed name of signed

Page 3 of 3

Filing Fee: S25.00

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