14000045789

(Re	questor's Name)	
(Ad	dress)	
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B. BOSTICK

JAN - 7 2015

EXAMINER

COVER LETTER.

TO: Regi	stration Section			
	Rekordmeister LLC			
SUBJECT:	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:			
	Tobias Meyer			
	Name of Person			
	Firm/Company			
	6580 Indian Creek Drive, Apt. 601			
	Address			
	Miami Beach, FL-33131			
	City/State and Zip Code	图图	201	
	meyertobias@gmx.ch E-mail address: (to be used for future annual report notification)	359	靈	***
		NS.	DEC 2	
For further in	formation concerning this matter, please call:	MAC C	w	
Tobias Me	eyer 510 529 8594	三四	<u> </u>	C
	Name of Person Area Code Daytime Telephone Number	RIN NO.	#: -	
Enclosed is a	check for the following amount:			
□ \$25.00 Fi	iling Fee \$\ \$30.00 \text{ Filing Fee & Gertificate of Status} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	o Status		

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

Rekordmeister LLC					
(<u>Name of the Limited L</u> (A F	iability Company lorida Limited Lia	y as it now appears on our reconbility Company)	ords.)		
The Articles of Organization for this Limited Liabil Florida document number L14000045789	ity Company w	vere filed on March 19, 2	2014	_ and assigr	ıed
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liabili	ity company here:			
The new name must be distinguishable and end with the word	ls "Limited Liabil	ity Company," the designation "	LLC" or the abbi	eviation "L.L.	C."
Enter new principal offices address, if applicable:		6580 Indian Creek Dr	ive, Apt. 60	128	
(Principal office address MUST BE A STREET A	DDRESS)	Miami Beach, FL-331	41 🙄	 	
			- 37	1 3	100 mm
Enter new mailing address, if applicable:		6580 Indian Creek Di	rive, Apt. 60	ائت لاسا	T
(Mailing address MAY BE A POST OFFICE BOX)		Miami Beach, FL-331	41 유물	f	J.
			©7ri ≫	$\overline{\omega}$	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	address here:		rds, <u>enter th</u>	e name of	the nev
New Registered Office Address:		Enter Florida street add	Iress		
	Miami Beach	,	Florida FL-3		
_		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 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 = Manager

<u>itle</u>	<u>Name</u>	Address	Type of Actio
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cnange	s to: 6560 indian Cr	reek Drive, Apt. 601, Miami B	each, FL-33141
T160 (1 1 1	20 43 41 41 3-4	of filings	(optional)
Litective date	, if other than the date	or ming:	(optional)
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Page 3 of 3

Filing Fee: \$25.00

SEGRETARY OF STATE SALLARASSEF, FLORIDA