

L14000110885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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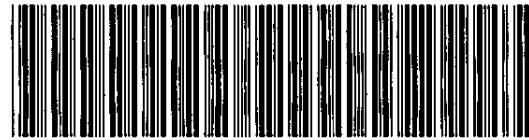
(Business Entity Name)

(Document Number)

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# **GeneralCorporateServices**

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August 15, 2014

Attn: Florida Department of State;

Enclosed are a check and a signed copy of the articles of amendment for: SERENDIPEDITY ENTERPRIZE GROUP, L.L.C.

Can you please file the articles of amendment and ship a copy of the filed documents back to me via FedEx in the envelope which I have provided.

Please contact us if there are any questions about the filing.

Thank you,  
Gerson Hernandez  
Legal Department Manager  
[gerson@1800company.com](mailto:gerson@1800company.com)  
Tel: 1-800-COMPANY  
Direct Tel: 661-310-2823  
Fax: 661-441-2025

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: **SERENDIPEDITY ENTERPRIZE GROUP, L.L.C.**  
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:

**Gerson Hernandez**

Name of Person

**General Corporate Services Inc.**

Firm/Company

**829 W. Palmdale Blvd #68**

Address

**Palmdale CA 93551**

City/State and Zip Code

**gerson@companiesinc.com**

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

For further information concerning this matter, please call:

**Gerson Hernandez**

Name of Person

at **(661) 310 2823**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

**FILED**  
**2014 AUG 18 PM 3:54**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SERENDIPEDITY ENTERPRIZE GROUP, L.L.C.**

(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 07/14/2014 and assigned Florida document number L14000110885.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Serendipity Enterprise Group, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**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*

\_\_\_\_\_, 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 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  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Antonio Hernandez	PO Box 449	<input type="checkbox"/> Add
		West Silverstar Rd. #651	<input checked="" type="checkbox"/> Remove
		Ochoee, FL 34761	
MGR	Bob Lambert	1285 Baring Blvd	<input checked="" type="checkbox"/> Add
		Sparks, NV 89434	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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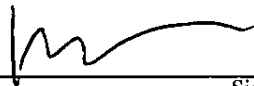
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 15, 2014



Signature of a member or authorized representative of a member

Bob Lambert - Authorized Representative / Manager

Typed or printed name of signee

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TALLAHASSEE, FLORIDA