

W5000094381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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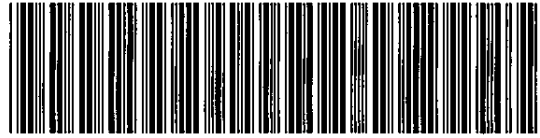
(Business Entity Name)

(Document Number)

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T. CLINE

JAN 10 2008

EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LEADING EDGE 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:

x Ryan Harshman  
(Name of Person)

x Leading Edge LLC  
(Firm/Company)

x 318 Bream Ave Unit B  
(Address)

x Fort Walton Beach, FL 32548  
(City/State and Zip Code)

For further information concerning this matter, please call:

x Ryan Harshman at (850) 226-8558  
(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)

x **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

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TALLAHASSEE, FLORIDA  
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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

f Leading Edge LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

September 26<sup>th</sup> 2005

The Articles of Organization for this Limited Liability Company were filed on OCTOBER 27TH 2005 and assigned Florida document number L05000094381.

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 "L.L.C."

**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:

x Ryan Harshman

New Registered Office Address:

x 318 Bream Ave Unit B

(Enter Florida street address)

x Fort Walton Beach, Florida 32548

(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 608, 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.*

x Ryan Harshman  
(If Changing Registered Agent, Signature of New Registered Agent)

FILED  
SEP 29 2005  
CLERK OF DISTRICT COURT  
FLORIDA

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:


MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ANN E. GALE	5233 BELAH DRIVE BAKER FL 32531	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
him x MGR	Ryan W. Harshman	318 Bream Ave Unit B Fort Walton Beach FL 32548	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
her x MGRM	Margaret E. Harshman	318 Bream Ave Unit B Fort Walton Beach FL 32548	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated January 6, 2008

  
Signature of a member or authorized representative of a member

Ryan Harshman  
Typed or printed name of signee

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
**FILED**