(Requestor's Name)				
(Address)				
(Address)				
(Audiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Basilisas Ellity Marro)				
(Document Number)				
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G. MCLEOD

JUN 10 2008

EXAMINER



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∀ €OVER LETTER

COVER DELITER
TO: Registration Section Division of Corporations
SUBJECT: Spot Holdings 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:
Stacey Stabile (Name of Person)
Spot Holdings LLC (Pirm/Company)
1081 Holland Drive
Boca Raton, FL 37487 (City/State and Zip Code)
For further information concerning this matter, please call:
Stacey Stabile at (561) 76 1-2070 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status 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

(Name of the Limited Liability Co. (A Florida Lim	ompany as it now appears o hited Liability Company)	n our records.)		
The Articles of Organization for this Limited Liability Com Florida document number <u>L05000123483</u> .	npany were filed on 12-		and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited</u>	d liability company here:			
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company,	" the designation "LLC"	or the al	obreviation
		White v. r.		
Enter new principal offices address, if applicable:	·		<u> </u>	
(Principal office address MUST BE A STREET ADDRES	<u> </u>		<u>~</u>	38
			Ē	물濟
			6-	SA P
E-ton nove - ciling address if applicable.			-70	
Enter new mailing address, if applicable:				<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			<u>.</u>	35 55 35 55
				-5
				13 *
B. If amending the registered agent and/or registered		records, <u>enter the</u>	name of	the new
registered agent and/or the new registered office address	s nere:			
Name of New Registered Agent:				
New Registered Office Address:				
Ten registered Office Address.	s)			
		, 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 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.

(If Changing Registered Agent, Signature of New Registered Agent)

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> **Type of Action** MGRM Zietz, David B. 1081 Holland Drive Boch Raton, PL 37487 _ Add Remove ☐ Add ☐ Remove Add 🗂 Remove Remove ☐ Add _ Add _ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated _____ Line . 2008. ignature of a member or authorized representative of a member Sam Zietz
Typed or printed name of signce

Page 2 of 2

Filing Fee: \$25.00