

L06000072744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

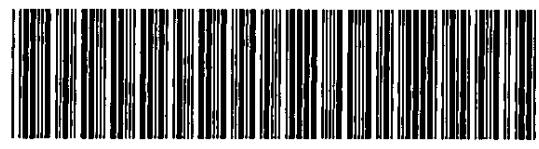
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Soma, 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:

Kevin Kane
(Name of Person)

The Andersen Firm
(Firm/Company)

1200 Plantation Island Dr. South, Suite 220
(Address)

St. Augustine, FL 32080
(City/State and Zip Code)

For further information concerning this matter, please call:

Kevin Kane at (904) 471-5040
(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)

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

Soma, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on July 21, 2006 and assigned document number L06000072744.

SECOND: This amendment is submitted to amend the following:

Article I: The name of the Limited Liability Company is: Somak, LLC

Article II: The street address of the principal office of the Limited Liability Company is 5658 North Oceanshore Blvd., Palm Coast, FL 32137. The mailing address of the Limited Liability Company is 5658 North Oceanshore Blvd., Palm Coast, FL 32137.

Article III: The name and address of the manager is:

Manager

Kevin Keith

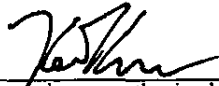
106 Dory Rd.

St. Augustine, FL 32086

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Dated October 3, 2006



Signature of a member or authorized representative of a member

Kevin Kane

Typed or printed name of signee

Filing Fee: \$25.00