

L07000042249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP. WAIT MAIL

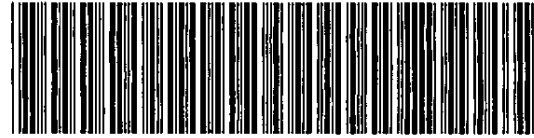
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. G. Gilman APR 11 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Scott Sadlon 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:

Scott Sadlon

Name of Person

Scott Sadlon LLC

Firm/Company

PO Box 500501

Address

Malabar FL 32950

City/State and Zip Code

BrevardAgent@gmail.com

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

For further information concerning this matter, please call:

Scott Sadlon

Name of Person

at (321) 252-9555

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

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TALLAHASSEE, FLORIDA

Scott Sadlon LLC

(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 April 20, 2007 and assigned Florida document number L07000042249.

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4885 N. Wickham Rd Suite 106

Melbourne FL 32940

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 500501

Malabar FL 32950

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: Scott Sadlon

New Registered Office Address: 4885 N. Wickham Rd Suite 106

Enter Florida street address

Melbourne, Florida 32940

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>	<u>Type of Action</u>
MGRM	Justin Sadlon	4885 N. Wickham Rd	<input checked="" type="checkbox"/> Add
		Suite 106	<input type="checkbox"/> Remove
		Melbourne FL 32940	
			<input 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.)

Manager Scott J Sadlon's new address is

4885 N. Wickham Rd. Suite 106

Melbourne FL 32940

Dated April 6, 2013



Signature of a member or authorized representative of a member

Scott J Sadlon

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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