107000047433

Requestor's Name)				
Address)				
Address)				
City/State/Zip/Phone #)	·			
WAIT	MAIL			
Business Entity Name)	• 			
(Document Number)				
Certificates of	Status			
Special Instructions to Filing Officer:				
	·			
	Address) Address) City/State/Zip/Phone #) WAIT Business Entity Name) Cocument Number) Certificates of			

Office Use Only





800102075978

08/27/07--01054--002 **25.00

DIVISION OF CORPORATIONS

OT AUG 24 PM 4: 24

BRYAN AUG 6 2007



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2007

JOCH OR JULIA SHOCK OPTION ONE SERVICES L.L.C. 4057 E. SUNFLOWER CIR. LABELLE, FL 33935

SUBJECT: OPTION ONE SERVICES LLC

Ref. Number: L07000047433

We have received your document for OPTION ONE SERVICES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 707A00048166

DIVISION OF CORPORATIONS
ON ALIG 24 PH 4: 24

COVER LETTER

TO: Registration Division of C				
SUBJECT:	DPTION ONE SO	SEVICES C.L.C.		
	(Name of Li	ERVICES C.L.C. mited Liability Company)		
The enclosed Articles of	of Amendment and fee(s) are so	abmitted for filing.		
Please return all corresp	pondence concerning this matte	er to the following:	•	
	JOCH O	r Julia Suock (Name of Person)	-1813	
	OPTION	ONE SERVICES ((Firm Company)		BIVISI 07 I
	4057	E. SUNFLOWER CIR		AUS 21
	(ABELI	E. FC. 33935 (City State and Zip Code)		OT AUG 24 PH 4: 24
For further information	concerning this matter, please			24
Jaco (Namo	H Strock e of Person)	at (<u>239) </u>	93 ne Telephone Number)	<u> </u>
Enclosed is a check for the	e following amount:			
₩ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	So.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclo	osed)

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

	(Present Name) (A Florida Limited Liability Company)		
		•	
FIRST:	The Articles of Organization were filed on $5-4-07$ and assigned document number 60700047433 .		
SECOND:	This amendment is submitted to amend the following:		
	AND MNG MEMBER DETAILS -	_	
	ADD LUCIA SHOCK - MANAGER		
	ADD JOCK SHOCK - MANAGER		
		_	
,		07/	SIVIC
ř.		AUG (
		124	FCO
		PM 4: 24	RY OF STATE CORPORATIONS
		- *. - 2	AATE
			35
Dated	7-25-, 2007		
	Signature of a member or authorized representative of a member	<u> </u>	
	Jack Stack Typed or printed name of signee	_	
	ryped or printed name or signee		

Filing Fee: \$25.00