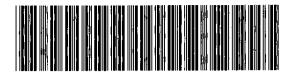
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

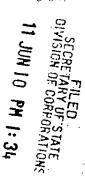
B. KOHH
JUN 1 0 2011
EXAMINER



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DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLEMASSEE, FLORIDA 11 JUN 10 PM 12: 38



Requester's Name Address LOSU-SU City/State/Zip Phone #	Office Use Only
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
1. Kim M. Miner (Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time Mail out Will wait	Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

ŀ	KIM M MINEHART, LLC			
(Name of the Limited	Liability Company as it now appea Florida Limited Liability Company)	irs on our records.)		
V	(Florida Elimica Elability Company)		9,	
The Articles of Organization for this Limited L	iability Company were filed on	MAY 23, 2007	ลกสารราฐภูมิส	
Florida document numberL0700005	4937			
	*			
This amendment is submitted to amend the foll	owing:		and assistant of the composition	
A. If amending name, enter the new name o	f the limited liability company he	<u>re</u> :	آ	
MIN	EHART REAL ESTATE, LLO		Z.	
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Comp	any," the designation "L		
Enter new principal offices address, if applic	eable:			
(Principal office address MUST BE A STREE	<u> </u>			
Trucipui office unuress brost ble A STREE	.TADDRESS)		and the same the same that an appropriate the same that th	
Enter new mailing address, if applicable:	-		. ayanasasasasasasasasasasasas	
(Mailing address MAY BE A POST OFFICE	BOX)			
				
B. If amending the registered agent and/		our records, <u>enter t</u>	he name of the nev	
registered agent and/or the new registered o	ffice address here:			
Name of New Registered Agent:	THE MESTDAGH LAW FIRM, P.A.			
New Registered Office Address: 253 N. ORLANDO AVE., SUITE 201				
new registered office readings.	Enter Florida street address			
	MAITLAND	. Florida	32751	
	City	, 1 IVI IUA	Zip Code	
New Registered Agent's Signature, if changing	•		-	

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 Chipter 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 Type of Action <u>Address</u> Title Name **MGRM** GLENN C. MINEHART 542 LANCER OAK DRIVE Remove APOPKA FL 32712 KIM M. MINEHART MGRM 542 LANCER OAK DRIVE Remove APOPKA, FL 32712 MGR **GLEN MINEHART** ☐ Add 542 LANCER OAK DRIVE Remove APOPKA, FL 32712 ____ Add Remove $\square Add$ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) JUNE 8 Dated ___ Signature of a member or authorized representative of a member Glenn Wine Mine of signee

Page 2 of 2

Filing Fee: \$25.00