L07000077646

Ben Lindquist (Requestor's Name)
(Requestor's Name)
3220 Old Bainbridge Rd.
(Address)
(Address)
Tallahassee, FL 32303 (City/State/Zip/Phone #)
(City/State/Zip/Phone #) \$\$o 980 698
☐ PICK-UP ☐ WAIT ☐ MAIL
Green Phosphor LLC (Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Cpostar monacus to 7 ming content

Office Use Only



600160936966

09/28/09--01002--005 **25.00

O9 SEP 28 AM 9: 58 69 SEP 28 M D: (

O9 SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 AM 9: 58 69 SEP 28 M D: (

ON SEP 28 A

S. HAWKES
SEP 2 8 2009
EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ög	TU 70	
SECR	ETARY	AM 10: 07 STATE FLORIDA
THE	MASSEE.	STATE

	Green Phosphor LLC	-KA//	ASSEE, FLORIDA
(Name of the Limit	d Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	CORIUA
The Articles of Organization for this Limited	Liability Company were filed on	July 27, 2007	and assigned
Florida document number L 0700007	77646		
This amendment is submitted to amend the fo	llowing:		,
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end w "L.L.C."	vith the words "Limited Liability Comp	any," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if appl	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			•
(Mailing address MAY BE A POST OFFICE	E BOX)		
	· 		
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter (</u>	he name of the new
Name of New Registered Agent:	Ben Lindquist		
New Registered Office Address:	3220 Old Bainbridge Road		
	En	ter Florida street ada	ress
	Tallahassee	, Florida	32303
	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

or Managing Member being added or removed from our records: FILED MGR = Manager SEP 28 AM 10: 07 MGRM = Managing Member SECRETARY OF STATE TALLAHASSEE, FLORIDA <u>Address</u> **Type of Action Title** <u>Name</u> CaseyCarter MGRM 3220 Old Bainbridge Road ☐ Add Tallahassee, FL 32303 Remove MGRM Ed London 74 Country Way □ Add X Remove Crawfordville, FL 32327 MGRM John W. Sheridan 1518 Caldwell Drive ☐ Add Remove Tallahassee, FL 32310 Ben Lindquist MGRM Add 3220 Old Bainbridge Road Tallahassee, FL 32303 Remove MGR Ben Lindquist ⊠Add 3220 Old Bainbridge Road Tallahassee, FL 32303 Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Signature of a member or authorized representative of a member Ben Lindquist Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00