L08000036448

(Reque	stor's Name)	
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(City/S	tate/Zip/Phone	#) .
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2009 FEB -9 AMII: 01
SECRETARY OF STATE
ANASSEE, FLORIDA

T CLINE
FEB 10 2009
EXAMNER

COVER LETTER

TO: Registration Sect Division of Corpo				
SUBJECT: O&D PR	R Services, LLC (Name of Limited Liability Company)		8	
	mendment and fee(s) are submitted for filing.			
Please return all correspond	dence concerning this matter to the following:			
	O'Riel D Segree			
	(Name of Person)			
	O&D PR Services, LLC			
	(Firm/Company)			
	3240 Wesday Rd SE			
	(Address)			
	Palm Bay, FL 32909			
	(City/State and Zip Code)		2	
For further information con	acerning this matter, please call:	SECRETARY TALLAHASSE	2009 FEB -	### ### ##############################
O'Riel D Segree	at (321) 414-4107	- XX	ف	12 22 22 22 22 22 22 22 22 22 22 22 22 2
(Name of	Person) (Area Code & Daytime Telephone Number)	OF S	AM	

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$30.00 Filing Fee &

Certificate of Status

Enclosed is a check for the following amount:

2 \$25.00 Filing Fee

STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mag P - MPP - Mag- Mag- Mag- Mag- Mag- Mag- Mag- Ma	(City)	(Zip Code)
	, F	lorida
New Registered Office Address:	(Enter Florido	a street address)
Name of New Registered Agent:		
registered agent and/or the new registered office addres	<u>s here</u> :	
B. If amending the registered agent and/or registered		s, enter the name of the nev
		3H 2
(Mailing address MAY BE A POST OFFICE BOX)		0=
Enter new mailing address, if applicable:		EEO AT
		-9 SSE SSE
		THE THE
(Principal office address MUST BE A STREET ADDRES	<u></u>	ZOUS F
Enter new principal offices address, if applicable:		F. 28
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the des	ignation "LLC" or the abbreviation
A. It amending name, enter the new name of the innited	a majority company nere:	
A. If amending name, enter the new name of the limited	d lightlitu sammany hans	
This amendment is submitted to amend the following:		
Florida document number L08000036448		
The Articles of Organization for this Limited Liability Com	npany were filed on 4/09/2008	and assigned
(Name of the Limited Liability Co	ompany as it now appears on our re nited Liability Company)	cords.)
O&D PR Services, LLC		

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 affending 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>	Name	Address	Type of Action
Miss	O'Riel D Segree, MGRM	3240 Wesday Rd SE Palm Bay, FL 32909	Add Remove
Mrs	O'Riel D Rose, MGRM		Add Remove
Miss	Joycelyn D Segree, MGR		Add Remove
			Add Remove
		E A	9
			Add Remove
D. If amen	nding any other information, enter ch	sange(s) here: (Attach additional sheets, if necessary.)	_
			- -
	6/2000		- -
Dated <u>02/00</u>	0/2009		
	<u> </u>	· a	***************
	_	ber or authorized representative of a member	•
	O'RIEL D SEGREE	vned or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00