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B. BOSTICK
MAY 21 2014
EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations** FDP Destin, 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: **Chris Beard** Name of Person Fortune & Beard, PC Firm/Company 2100 1st Ave N, Ste 300 Birmingham, AL 35203 City/State and Zip Code efarris84@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (850) Aren Code Daytime Telephone Number **Edward Earl Farris** Name of Person Enclosed is a check for the following amount: S25.00 Filing Fee □ \$30.00 Filing Fec & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS: Registration Section

Certificate of Status

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

STREET/COURIER ADDRESS:

Certificate of Status &

Certified Copy (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

(Name of the Limited	Liability Compa	ny as if now appears on our s	ecords.)	
The Articles of Organization for this Limited Lial				and assigned
Florida document number L1000005132	•			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	<u>he limited liabi</u>	lity company here:		
The new name must be distinguishable and end with the we	ords "Limited Liab	ility Company," the designatio	n "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:				1.7
(Principal office address MUST BE A STREET	ADDRESS)			
				3 ,
Enter new mailing address, if applicable:		88 Easy Living S	st	: J
(Mailing address MAY BE A POST OFFICE BOX)		Freeport, FL 324	39	1.9
				·
B. If amending the registered agent and/or			cords, enter the	name of the new
registered agent and/or the new registered office	ce address here	:		
Name of New Registered Agent:	Edward Ea	arl Farris, Jr.		<u> </u>
New Registered Office Address:	88 Easy Li	 	···	
		Enter Florida street a		
	Freeport	City	_, Florida 3243	39 Zip Code
New Registered Agent's Signature, if changing Re-	elstered Agent:	•		4

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 605, 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** Address Title Name 1009 Mountain Trace **MGR** Christopher S. Beard □ Add Birmingham AL 35242 Remove 191 Pisces Dr Patrick J. Chimento IV MGR D Add Santa Rosa Beach, FL 32459 Remove 88 Easy Living St Edward Earl Farris, Jr. MGR **≋** Add Freeport, FL 32439 ☐ Remove ☐ Remove

			Mere. (Ander dann	ional sheets, if necessary.)
 .				
			·-	
Effective date (The effective date the date this doc	, if other than the common is filed by the Flor	late of filing: t be prior to date of receipted Department of State)	pt or filed date and cannot	(optional) be more than 90 days after
Dated	121/14	\;\ <u>\</u>	<u> </u>	
Dated		/ Y - '		
		ignature of a member of	r authorized representativ	e of a member

Page 3 of 3

Filing Fee: \$25.00