

L10 00038004

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JAN - 4 2011

EXAMINER



600189053016

01/03/11--01008--025 **25.00

FILED
11 JAN - 3 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SARK PROPERTIES, 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:

SHANNON UNGERER
Name of Person

SARK PROPERTIES, LLC
Firm/Company

701 S HOWARD AVE, STE 106-225
Address

TAMPA, FL 33606
City/State and Zip Code

SUNGERER10@MSA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHANNON UNGERER at (813) 390 4277
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

SARK PROPERTIES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/8/2010 and assigned
Florida document number L10006038084

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

701 S HOWARD AVE
STE 106-225
TAMPA, FL 33606

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

701 S HOWARD AVE
STE 106-225
TAMPA, FL 33606

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

SAME NAME (SHANNON UNGERER)

New Registered Office Address:

701 S HOWARD AVE, STE-106-225

Enter Florida street address

TAMPA
City

Florida

33606
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

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

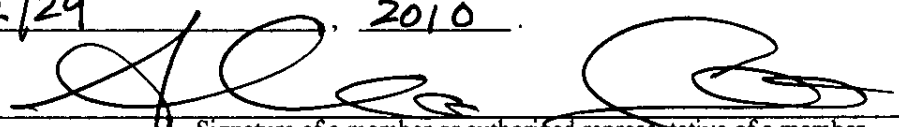
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SHANNON UNGERER	701 S HOWARD AVE STE 106-225 TAMPA FL 33606	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> CHANGE ADDRESS
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

MY INTENTION OF THIS AMENDMENT IS TO CHANGE ADDRESS:
NOWHERE SHOULD IT SHOW 2423 W SUNSET DR.
ALL SHOULD READ
701 S HOWARD AVE, STE 106-225
TAMPA, FL 33606

THANK YOU!!

Dated 12/29 2010


Signature of a member or authorized representative of a member
SHANNON UNGERER
Typed or printed name of signee