

L13000022508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

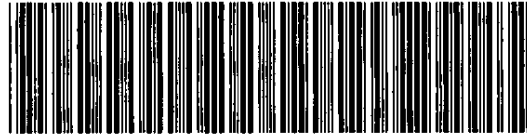
(Document Number)

Certified Copies _____ Certificates of Status _____

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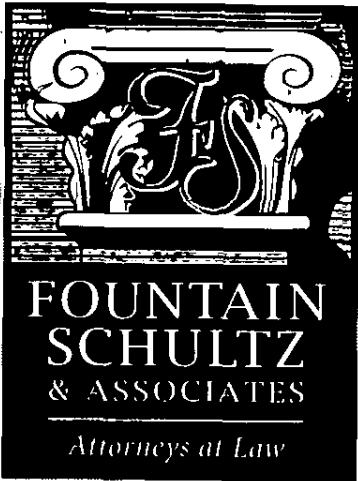


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14 JUL 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3 Burch, JUL 25 2014



July 23, 2014

VIA REGULAR US MAIL

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

KENNETH R. FOUNTAIN
KERRY ANNE SCHULTZ
SCOTT C. BRIDGFORD

RE: The Ether Mae Group, L.L.C.

Dear Sir or Madam:

The enclosed Articles of Amendment to Articles of Organization are submitted for filing. Also enclosed is check # 1479 in the amount of \$25.00 for the filing fee.

Please return in self-addressed stamped envelope that is provided.

Thank you for your consideration.

Sincerely,

FOUNTAIN, SCHULTZ & ASSOCIATES, PL

Kerry Anne Schultz, Esquire

KAS/lrd
Enclosed as stated

2045 FOUNTAIN PROFESSIONAL CT.

SUITE A

NAVARRE, FLORIDA 32566

TEL: (850) 939-3535

FAX: (850) 939-3539

SANTA ROSA BEACH

TEL: (850) 622-2700

FAX: (850) 622-2722

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE ETHER MAE GROUP, 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 February 12, 2013 and assigned
Florida document number L13000022508

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 10
GULF Breeze, FL
32562

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:

Kerry Anne Schultz

New Registered Office Address:

2045 Fountain Professional Court, Suite A

Enter Florida street address

Navarre

City

Florida 32566

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 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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Sally Ann Radlauer, Trustee	105 S. Baylen Street, Pensacola, FL 32502	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
MGR	Sally A. Radlauer	105 S. Baylen Street, Pensacola, FL 32502	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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 TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

July 22, 2014

Sally A. Radlauer

Signature of a member or authorized representative of a member

SALLY A. RADLAUER

Typed or printed name of signer

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TALLAHASSEE, FLORIDA