

L13000039257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

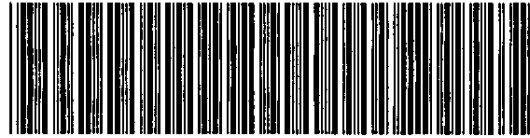
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 18 2013
J. BRYAN

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FTTE, 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:

Bjorn Rosinus

Name of Person

FTTE, LLC

Firm/Company

23190 Fashion Dr. #205

Address

Estero, FL 33928

City/State and Zip Code

BjRosinus@AlicoCommercial.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bjorn Rosinus

Name of Person

at (**239**) **949-3098**

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

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TALLAHASSEE, FLORIDA

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

FTTE, 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 3/11/2013 and assigned Florida document number L13000039257.

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)

Enter new mailing address, if applicable:

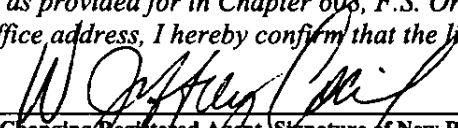
(Mailing address MAY BE A POST OFFICE BOX)

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: CECIL, W JEFFREY, ESQ
New Registered Office Address: 9132 STRADA PLACE 3RD FLOOR
Enter Florida street address
NAPLES, Florida 34108
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

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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>
MGRM	BJR&FJR, LLC	23190 FASHION DR. #205	<input type="checkbox"/> Add
		ESTERO, FL 33928	<input checked="" type="checkbox"/> Remove
MGRM	FLORIDA TRACKS AND TRAILS, INC.	41660 LITTLE FARM ROAD	<input type="checkbox"/> Add
		PUNTA GORDA, FL 33982	<input checked="" type="checkbox"/> Remove
MGR	TAURUS ADVENTURE MANAGEMENT, LLC	41660 LITTLE FARM ROAD	<input checked="" type="checkbox"/> Add
		PUNTA GORDA, FL 33982	<input type="checkbox"/> Remove
MGR	BUCKING BULL, LLC	23190 FASHION DRIVE #205	<input checked="" type="checkbox"/> Add
		ESTERO, FL 33928	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove

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Add
Remove

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

Dated July 3, 2013.

[Handwritten Signature]

Signature of a member or authorized representative of a member

BJORN ROSINUS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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