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J. BRYAN

DEC 2 9 2008

EXAMINER

COVER LETTER

Division of Cor			
SUBJECT: 1400 M	IETRO. LLC		B
		ited Liability Company)	
	Amendment and fee(s) are sub ondence concerning this matter	•	
	SAM B. WADDILL		
		(Name of Person)	
	1400 METRO, LLC		
		(Firm/Company)	
	250 JOHN KNOX ROAD	, STE. 8	OB TAL
		(Address)	DEC 29 CRETAR
	TALLAHASSEE, FL 323	03	7AR AS:
		(City/State and Zip Code)	me 3 m
For further information of	concerning this matter, please c	call:	FLOR USE
JOHN B. WADDILL		at (850) 524-4518	DE DE
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he 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)
Mail	ING ADDRESS:	STREET/COURIER	ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



1400 METRO, L.L.C.

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

Florida document number L01000002951	
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 abbre "L.L.C."	viation
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 registered agent and/or the new registered office address here:	e new
Name of New Registered Agent:	
New Registered Office Address: (Enter Florida street address)	
(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)

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 **Title** <u>Name</u> **Address Type of Action** MGRM SAM B. WADDILL 250 JOHN KNOX ROAD, STE. 8 **■** Add TALLAHASSEE, FL 32303 ₹ Remove JOHN B. WADDILL MGRM 250 JOHN KNOX ROAD, STE 8 **■** Add TALLAHASSEE, FL 32303 Remove **□** Add Remove ☐ Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated DECEMBER 29 2008 Signature of a member or authorized representative of a member SAM B. WADDILL Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00