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SECRETARY OF STATE
SECRETARY OF FLORIDA

COVER LETTER

TO: Registration Section Division of Corporation			•	
SUBJECT:			.L.C.	
	Name of Limited	d Liability Company		
	:			
The enclosed Articles of An	endment and fee(s) are subm	itted for filing.		
Please return all corresponde	ence concerning this matter to	the following:		
	Timoth	Name of Person	-Grath	
	AAA To	Firm/Company	e I.C.	
	555	Challenger	Pd.	
	Cape G	anavea) F	L 32926	Ó
	T+M C9	City/State and Zip Code		<u>^</u>
For further information con-	erning this matter, please cal	•	,	
Timothy Inc	mas McGath	at (32) 8	68-988 & Daytime Telephor	S ne Number
Enclosed is a check for the t	ollowing amount:			
\$25.00 Filing Fee	330.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is		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

FILED and assigned

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 Florida document number 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: New Registered Office Address: Enter Florida street address

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.

Page 1 of

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

naging Member		
<u>Name</u>	Address	Type of Action
Larry Mullin	555 Challenger Rd. Cape (anaveral, FL 32920	Add Remove
Tim MGG1ath	555 (hallenger fol.	Add Compared to the compared t
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ng any other information, enter change(10:FEB
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(/LARRI L	E Mullin	
	Name Lasy Mullin Tim MGGath any other information, enter changes Signature of a member o	Name Lasy Mullin S55 (hallenger std. Case (anautra), Fl. 32920 Tim MG(ath) 555 (hallenger std. Case Canavera), Fl. 32920 Aga Canavera, Fl. 32920 Aga Canavera, Fl. 32920 Sygnature of a merther or authorized subject anishys of a member

Page 2 of 2

Filing Fee: \$25.00