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JUN 12 2008

EXAMINER



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06/11/08--01025--013 **25.00

08 JUN 11 PM 12: 17

COVER LETTER

División of Co	rporations "		
SUBJECT: Seasid	e Winas, LLC		0
Scholer.		ited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Felicia Henderson		
		(Name of Person)	
	Matthews & Hawkins, P.	Α.	
		(Firm/Company)	
	4475 Legendary Drive		
		(Address)	
	Destin, FL 32541		
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Felicia Henderson		at (_850_)_837-3662	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	1 \\$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:

OT.

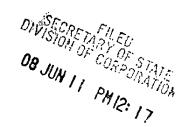
Registration Section

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



Seaside Wings, 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 06/29/2000	and assigned
Florida document number 1.00000006746		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Fox Reppert, LLC		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the design	nation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	4010 Commons Drive West	
(Principal office address MUST BE A STREET ADDRESS)	Suite 112	
	Destin, FL 32541	
Enter new mailing address, if applicable:	4010 Commons Drive West	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 112	
	Destin, FL 32541	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
· ·	(Enter Florida st	reet address)
	, Flor	ida
	(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 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

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
). If amendi	ing any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.)	
			_
Dated JUN	le 10th, 2	1008	
_	My	ber or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00