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MAR 27 2008

COVER LETTER

TO: Registration Section Fig. Division of Corporations
SUBJECT: SUPPLIED SUPPLIED (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:
ASMEY K. VINEY Sunvist Awd Salts (Firm/Company) (Address) Struct FL ZHCCH (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (172) 28(o-900) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee \$\$ \$55.00 Filing Fee \$\$ \$60.00 Filing Fee, Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) 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 OF

(Name of the Limited Liab (A Flor	pility Company as it now appears on ida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabili Florida document number	ty Company were filed on D3/	and assigned
This amendment is submitted to amend the following	g:	08
A. If amending name, enter the new name of the	limited liability company here:	AR 26 RECRETA
The new name must be distinguishable and end with the "L.L.C." B. If amending the registered agent and/or registered agent and/or the new registered office:	egistered office address on our	FLORITE STATE
Name of New Registered Agent:		
New Registered Office Address:	(Enter)	Florida street address)
<u></u> -	, Florida	
	(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 Name Type of Action **Address** X Add Remove X Add Remove Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00