## 101000003887

9				
(Requestor's Name)				
	drace)			
DA)	dress)			
(Ad	dress)			
`	,			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
•	•	,		
(Document Number)				
Cadillad Caulas	Cartification	a of Chahua		
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
	,			

Office Use Only

. 10



900184824499

09/07/10=-01024--021 \*\*25.00

HILE By

10 SEP -7 AMII: 28

SLOWING STATE
TAIL AND SEFER FROM THE

S. HAWKES

SEP 0 8 2010

EXAMINER

## **COVER LETTER**

Division of Cor	porations			
SUBJECT:	Cards & Gift	s of St. Cloud, LLC	·	
Sobolett.		ted Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Phillip C Owen		
	Name of Person			
	Cards	Cards & Gifts of St. Cloud, LLC		
	Firm/Company			
	150	1509 Sunset Pointe Place		
		Address	<del></del>	
	K	Kissimmee, FL 34744		
	City/State and Zip Code			
	E-mail address: (t	patbran07@aol.com  E-mail address: (to be used for future annual report notification)		
For further information c	oncerning this matter, please c	all:		
Pat	ricia Brannon		392-6317	
Name o	f Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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 .

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

CARDS & GIFTS OF ST. CLOUD, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 03/14/2001 The Articles of Organization for this Limited Liability Company were filed on and assigned L01000003887 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 ethe 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 , 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 **Type of Action** Name Address **Title** MGRM Bruce Hugh Brannon 2260 Emperor Drive ✓ Add Remove Kissimmee, FL 34744 Phillip C Owen MGRM 1509 Sunset Pointe PL ☐ Add Kissimmee FL 34744 ✓ Remove MGRM Marian L Owen 1509 Sunset Pointe PL Kissimmee FL 34744 Remove □Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 1, 2010 Dated \_

Phillip C. Owen
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

Signature of a member of authorized representative of a member