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C. LEWIS

APR -3 2012

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: - Sutton Asset Management	
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:	
William F S. How JR. Name of Person	
Sutton Asset Management Firm/Company	
7853 Gunn Hay #392	
Tampa Fl 33626 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
William F Suffow M at (8/3) 245 5/62 Name of Person 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 (additional copy is enclosed) \$ Certified Copy (additional copy is enclosed)	sed)
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

FILED

Name of the Limited Liability Compar (A Florida Limited L	12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52 Na sement LLC 12 APR -2 PM 1: 52
The Articles of Organization for this Limited Liability Company Florida document number <u>LOIOOOO 4 1 95</u> .	•
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ilita aanaan kana
4. It amending hame, enter the new hame of the minted hab	mry company nere.
The new name must be distinguishable and end with the words "Limit'L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	7853 GUNN HWY #392
Principal office address MUST BE A STREET ADDRESS)	7853 GUNN HWY # 392 Tampa FL 33626
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7853 GUNN Huy #392 Tampa FL 33626
B. If amending the registered agent and/or registered off 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:

₩GR = Manager MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add	
			Add Remove	
			☐ Add	
			D Damova	
			Add Remove	
			∏Add	
			Remove	
			AddRemove	
D. If amen	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if neces	sary.)	
				
_			12 A	
			APR -2 PM	
 Dated	3/29/2012.		PM 1: 53 PK STATE EFFLORIDA	
	Signature of a member	er or antiforized representative of a member		
	William Tune	J. Sultan TR		

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Filing Fee: \$25.00