L03000009422

(Requestor's Name)				
(Address)				
·				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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SECRETARY OF STATE
AND AHASSEE FLORIDA

MAY 23 20081

N. Oddings

COVER LETTER

TO: Registration So Division of Co			
SUBJECT: Alpha R	esources, LLC		
	(Name of Lin	nited Liability Company)	
	Amendment and fee(s) are sulpndence concerning this matter	_	
	Larry S. Griffith		
		(Name of Person)	
	Alpha Resources, LI		- to a constant of the constan
		(Firm/Company)	
	5334 Greenside Cou		akali kalannan kalannan kalanna kalanna kalanna kalanna
		(Address)	
	Orlando, FL 32819		
		(City/State and Zip Code)	
For further information of	concerning this matter, please of	call:	
Larry S. Griffith		at (407) 595-7567	<u> </u>
(Name	of Person)	(Area Code & Daytime	Felephone 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 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



Alpha Resources, LLC			
(Name of the Limite	d Liability Company as it now appears A Florida Limited Liability Company)	on our records.	
The Articles of Organization for this Limited 1	Liability Company were filed on 03/1	7/2003 and assigned	
Florida document number <u>L03000009422</u>	•		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability company here:	•	
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Company	," the designation "LLC" or the abbreviation	
B. If amending the registered agent and registered agent and/or the new registered of		r records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	5334 Greenside Court		
- : arr vandense nar meers van maan.	(Ente	r Florida street address)	
	Orlando, FL (City)	, Florida 32819 (Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register the provisions of all statutes relative to the accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	proper and complete performance of ristered agent as provided for in Cha registered office address, I hereby c	my duties, and I am familiar with and oter 608, F.S. Or, if this document is	

(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 = Man MGRM = M	ager anaging Member		
Title	Name	Address	Type of Action
MGRM	Brandon E. Griffith	45 Maleena Mesa St Suite 418 Henderson, NV 89074	Add Remove
<u> </u>			Add Remove
	<u></u> -		Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
			Add Remove
	ng any other information, enter change ling Address: 5334 Greenside Ct.	(s) here: (Attach additional sheets, if necessary.)	
	Orlando, FL 32819		OB MAY 22 SECRETARY ALL AHASSE
			AM II: 19 OF STATE
Dated April 2	1 wiff	or authorized representative of a member	
Ī	_arry S. Griffith		
	Typed o	r printed name of signee	

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Filing Fee: \$25.00