L03 0000 17673

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SECRETARY OF STATE
MINASSEE FIORIDA

COVER LETTER

TO:	Registration Section Division of Corpo		· * ,			
SUBJ	ECT:	Boos Florida	Development, LLC			
		Name of Limit	ed Liability Company			
The en	closed Articles of Ar	nendment and fee(s) are sub	mitted for filing.			
Please	return all correspond	ence concerning this matter	to the following:			
		В	ryan J. Stanley, Esq.			
			Name of Person			
		В	ryan J. Stanley, P.A.			
			Firm/Company			
			209 Turner Street			
			Address			
		C	learwater, FL 33756			
		_	City/State and Zip Code			
	bryan@bryanjstanley.com E-mail address: (to be used for future annual report notification)					
For fu	ther information con	cerning this matter, please ca	all:			
Bryan J. Stanley Name of Person			at (<u>727</u>) 46 Area Code & Daytime T	61-1702 elephone Number		
Enclos	ed is a check for the	following amount:				
₹ \$2:	5.00 Filing Fee [\$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:

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 ORGANIZATIO

ARTICLES OF ORGANIZATION₁₁
OF

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Boos Florida Development, 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	05/15/2003	and assigned
Florida document number	L03000017673			
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liab	ility company here	;	
The new name must be distingu	ishable and end with the words "Limi	ited Liability Compan	y," the designation "L	.LC" or the abbreviation
Enter new principal offices	address, if applicable:			
(Principal office address MU	<u>IST BE A STREET ADDRESS)</u>			
Enter new mailing address,	if annlicable:			
(Mailing address MAY BE A	• •			
	ered agent and/or registered of new registered office address her		ır records, <u>enter t</u>	he name of the new
Name of New Regis	tered Agent:			
New Registered Off	ice Address:			
		Ente	er Florida street addi	ress
			, Florida	7: 0 ;
		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 MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Robert B. Boos	2651 McCormick Drive Clearwater, FL 33759	✓ Add ☐ Remove
			D D amazza
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information	, enter change(s) here: (Attach additional sheets, if	FILED OCT 18 PM ECRETARY OF S LLAMASSEE, FL
 Dated	October 7	, 2011 .	IZ: 46
		(1st + 1 Pm	
	Signatur	re of a member or authorized representative of a member	
	Oignatui	Robert D. Boos	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00