(Re	questor's Name)				
	J				
(Address)					
(Ad	dress)	<u> </u>			
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Do	cument Number)				
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Certified Copies	_ Certificates	of Status			
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B. Todock MAR 9 1 2008

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ		
	(Name of Limited Liability Company)	
The e	osed Articles of Amendment and fee(s) are submitted for filing.	
Please	eturn all correspondence concerning this matter to the following:	
	Joe G. Pozo Ja. (Name of Person)	
	(Name of Person)	
	GO BOATTREE Inc (Firm/Company)	
	(Firm/Company) 2202 - 33 K STREET (Address)	
	ORLANG. FL 32839 (City/State and Zip Code)	
	(-1.5	
For fu	ner information concerning this matter, please call:	
	Toe 620 at (40), 257-3899 (Name of Person) (Area Code & Daytime Telephone Number)	
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclo	d is a check for the following amount:	
\$ \$2	Of Filing Fee \$\ Solon Filing Fee & Solon Filing Fee & Solon Filing Fee, Certificate of Status & 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



March 10, 2008

ALABASTER, LLC 2202 33RD STREET ORLANDO, FL 32839

SUBJECT: ALABASTER, LLC Ref. Number: L03000034178

We have received your document for ALABASTER, LLC and your check(s) totaling \$560.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock Senior Section Administrator

Letter Number: 608A00014560

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIVISION OF CORFORATIONS

08 MAR 21 PM 3: 50

(Zip Code)

	ABASTER, LLC	O NS
(Name of the Limited I	Liability Company as it now appears on our Florida Limited Liability Company)	<u>records.</u>)
The Articles of Organization for this Limited Lia	ability Company were filed on 9-10.	2003 and assigned
This amendment is submitted to amend the follo	wing:	
A) If amending name, enter the new name of	LLC	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the	lesignation "LLC" or the abbreviation
B. If amending the registered agent and/o		rds, enter the name of the new
Name of New Registered Agent:	100 G Pozo In. 2202 - 33 PM STRO	
New Registered Office Address:	2202 - 33 Enter Flor	G E (ida street address)
	001	3282

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.

(City)

(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 = Ma $MGRM = N$	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add
			Remove
•			Add Remove
			Add
			Remove
			Add Remove
D. If amen	ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)	,
_			
			_
Dated	3/18/07		_
	Signature of a mea	M6. Men 6 m.	
	Tvr	or authorized representative of a member $\int O\mathcal{E} G \cdot \log \mathcal{L}_O$ ped or printed name of signee	<u> </u>

Page 2 of 2

Filing Fee: \$25.00