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EXAMINE

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COVER LETTER

TO: Registration Division of C				
SUBJECT:	Currie	Brothers, LLC		
	Name of Lin	ited Liability Company		
	of Amendment and fee(s) are su	_		
Please return all corres	spondence concerning this matte	r to the following:		
		Patrick Currie	_	78. TAS
		Name of Person		ECK!
		Currie Brothers, LLC		2011 JUNIL PH S SECRETARY OF S TALLAHASSEE, FL
•		Firm/Company		
		6811 NW 40th Dr.		OF STATE
		Address		RIDA
		Gainesville, FL 32653	······································	
	nn	City/State and Zip Code atrickcurrie@gmail.com		
	E-mail address:	to be used for future annual report not	ification)	
For further information	concerning this matter, please	call:		
	Patrick Currie	at (_352)	262-5067	
Name	e of Person	Area Code & Dayti	me Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	e of Status &
MAI	LING ADDRESS:	STREET/COUR	HER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Currie Broth	ers, LLC			
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears bility Company)	on our records.)		
The Articles of Organization for this Limited Liability Company w	vere filed on	12/12/2003	and assig	gned
Florida document numberL0300052419				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	tv company here:	NA		
The new name must be distinguishable and end with the words "Limited "L.L.C."	d Liability Company	," the designation	"LLC" or the ab	breviation
Enter new principal offices address, if applicable: \\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			至常 🗲	
(Principal office address MUST BE A STREET ADDRESS.)			ASS	
			mo ===	
Enter new mailing address, if applicable:			F STATE	Ö
(Mailing address MAY BE A POST OFFICE BOX)	•		Σ'' (→	
office address here:	e address on ou	r records, <u>enter</u>	the name of	the new
		*		
New Registered Office Address:	F4	F1 - 2.1 - 4 - 4		
	Lnter	r Florida street ad	aress	
	Cit.	, Florida _	7: 0:1	
	City A \		Zip Code	
- Properties and Statement of the State of t	1U/ I X			

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 600, 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>	Name	Address	Type of Action
MGRM	Neal Michael Currie	421 Bob McCaskill Dr. DeFuniak Springs, FL 32433	✓ Add Remove
MGRM	Haynes Edwin Currie	6811 NW 40th Dr Gainesville, FL 32653	✓ Add Remove
-			Add Remove
	······································		Add Remove
			ALLARIAN RELEVE
=			SERVICE AND THE SERVICE AND TH
D. If amend	ling any other information, enter chan	nge(s) here: (Attach additional sheets, if necessar	ŞÃ 2
	,		·
	Signature of a memb	er or authorized representative of a member	
		Patrick Currie	

Page 2 of 2

Filing Fee: \$25.00

april 24, 2011



Currie Brothers, LLC

At a Meeting to Add Members as Managing Members

Resolved: It was agreed by all three Members of Currie Brothers LLC (Patrick Currie, Neal Michael Currie and Haynes Edwin Currie) that Neal Michael Currie and Haynes Edwin Currie be added as Managing Members. It was further agreed that Patrick Currie remain as Manager.

Patrick Currie, Manager

Date