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SECRETARY OF STATE
ASSEE, FLORIDI

C. LEWIS

JAN 1 1 2010

EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp						
SUBJE	CT:	F.	AN, LLC				
	Name of Limited Liability Company						
The enc	closed Articles of A	Amendment and fee(s) are sub	omitted for filing.				
Please r	eturn all correspor	ndence concerning this matter	to the following:				
		* ** ** ** ** ** ** ** ** ** ** ** ** *	Mark Garrett				
			Name of Person				
		G	Sarrett Law Firm, P.A.				
			Firm/Company				
		185	50 Lee Road, Suite 330				
			Address				
		V	Vinter Park, FI 32789				
			City/State and Zip Code				
		E-mail address: (to be used for future annual report notific	cation)			
For furt	her information co	oncerning this matter, please c	call:				
	Ma	ark Garrett	at (_407)	647-5880			
Name of Person			Area Code & Daytime				
Enclose	d is a check for th	e following amount:					
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

то:

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 2010 JAN -8 PM 3: 09

SECRETARY OF STATE TALLAHASSEE, FLORIDA

			IALLAN	HOOLE, LLOKIUA
<u> </u>		FAN, LLC		
(<u>Nam</u>	e of the Limited Liability (A Florida l	Company as it now ap	pears on our records.)	
	(A Florida I	emined Elaointy Compa	ury)	
The Articles of Organization for	r this Limited Liability C	Company were filed on	December 19, 2003	and assigned
Florida document number	L0 3 00054798	Lazana	11508	_ •
. Tortue document marriour		020005	4/90	
This amendment is submitted to	amend the following:			
A. If amending name, enter the	he new name of the limi	ited lighility company	here.	
··· II amonum <u>e</u> namo, <u>enter ti</u>	to new name of the min	ted nability company	· ucic.	
The new name must be distinguish	nable and end with the war	ede "Limited Liability Co	omnany " the designation "I I	C" or the abbreviation
"L.L.C."	natic and that with the wor	ds Ellined Elabinty Co	ompany, the designation LL	C of the addreviation
Enter new principal offices ad	dress if annlicable			
(Principal office address MUS'	<u>I BE A STREET ADDR</u>	(ESS)		
		·		
Enter new mailing address, if	applicable:			
(Mailing address MAY BE A P	OST OFFICE BOX)			
				
B. If amending the register	ed agent and/or regist	tered office address	on our records, enter the	name of the new
registered agent and/or the ne	w registered office add	ress here:		
Name of New Register	red Agent:			····
New Registered Office	A Adduces			
New Registered Office	: Address:	<u>-</u>	Enter Florida street addre	2.2
				~
		City	, Florida	Zip Code
		c_{ny}		Lip Coue

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

Title	Name	Address	Type of Action
MGRM	Leila J. Nodarse	1675 Lee Road Winter Park, Fl 32789	Add Remove
MGRM_	Leila J Nodarse as Trustee	1675 Lee Road Winter Park, Fl 32789	✓ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	v.)
	December 18 20	ob9 /	2010
Dated		er or authorized representative of a member	FILED 2010 JAN -8 PM 3: 18 ISECRETARY OF STATE ALLAHASSEE, FLORID
	Туре	Leila J Nodarse d or printed name of signee Page 2 of 2	PM 3: IB

Filing Fee: \$25.00