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SECRETARY OF STATE

J. BRYAN

MAY - 5 2009

EXAMINER

COVER LETTER

то:	Registration Se Division of Cor		g 8		
SUBJE	CT:	A A Cly	ydes Services		
			ted Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		W	/illiam Clyde Coker, Ill		
			Name of Person		
			Clyde's Services		
			Firm/Company		
		8	15 north 77th Avenue		
			Address		09 MAY SECRET
	Pensacola, Florida 32506		MAY -4 CRETAR		
	City/State and Zip Code		W/		
		clyde@cl E-mail address: (1	ydesservices.gccoxma to be used for future annual repo	ail.com ort notification)	'' - F
For furt	her information o	concerning this matter, please c	rall:		AN 9: 33 OF STATE EE, FLORIDA
	D	onna Coker	at (850)	453-2982	
	Name o	of Person	Area Code &	Daytime Telephone Numbe	r
Enclose	d is a check for t	he following amount:			
₹ 25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	ate of Status &
		ING ADDRESS: ration Section	STREET/C Registration	OURIER ADDRESS: Section	

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

(Nome of the Limited Eller	A A CI		2000年二		
(A Flor	ida Limited L	ny as it now appears on our records. Jability Company)	競上加		
The Articles of Organization for this Limited Liabili	ty Company	were filed on	and assigned		
Florida document number 104000 1716	·		LORIO LORIO		
This amendment is submitted to amend the following	g:		P		
A. If amending name, enter the new name of the	limited liab	ility company here:			
CI	yde's Serv	rices LLC			
The new name must be distinguishable and end with the "L.L.C."	words "Limi	ted Liability Company," the designation	on "LLC" or the abbreviation		
Enter new principal offices address, if applicable	;	815 North 77th Avenue			
(Principal office address MUST BE A STREET AL	DDRESS)	Pensacola, Florida 32506			
Enter new mailing address, if applicable:		815 North 77th Avenue			
(Mailing address MAY BE A POST OFFICE BOX)		Pensacola, Florida 32506	N/A		
B. If amending the registered agent and/or registered agent and/or the new registered office		· · · · · · · · · · · · · · · · · · ·	ter the name of the new		
Name of New Registered Agent: N	/A				
New Registered Office Address:					
		Enter Florida street address			
	, Florid				
		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 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:

MGRM = Ma	anaging Member	- ,	
<u>Title</u>	Name	Address	Type of Action
			Add Remove
	<u></u>		Add Remove
D'annes de la constantina de			Add Remove
			Add Remove
			Add Remove
			Add Remove
	ing any other information, enter Nending Hame back t	change(s) here: (Attach additional sheets, if necessary.) b Driginal Co. Hame. AHASSEE, FROM SEE, FROM S	
Dated	May 01 ,	2009	. ພ
	Signature of a r	member or authorized representative of a member	
		William Clyde Coker, III	
 Dated	Willa	2009. And Walk Doka M4 member or authorized representative of a member	<i>?</i>

Page 2 of 2

Filing Fee: \$25.00