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B. BOSTICK
FEB 2 1 2011
EXAMINER

COVER LETTER

	gistration Sectivision of Corpo						
SUBJECT:		SAWH'S AN	IGUS RANCH LLC				
SOBOLC I.			ited Liability Company				
The encloses	d Articles of Ar	nendment and fee(s) are sub	omitted for filing.				
Please returi	n all correspond	ence concerning this matter	to the following:				
			RAWLE SAWH		-		
			Name of Person				
					TALL SE		
			Firm/Company	- · · ·	25	833	# 4 0
87-21 252ND STREET			ASS.	3 : 8	erran Museum 1		
Address		m		5 1			
	BELLEROSE, NEW YORK 11426		71.01.7 1.01.5	PH 2: 5	(
			City/State and Zip Code		STATE LORIDA	55	
		E-mail address: (1	to be used for future annual report	t notification)			
For further is	nformation con	cerning this matter, please c	call:				•
	RAW	LE SAWH	at (917)	407-2663			
	Name of P	erson	Area Code & D	aytime Telephone Number	r		
Enclosed is a	a check for the	following amount:					
□\$2 5.00 F	iling Fee [\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certified	ate of Statu		ed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/CO Registration S Division of C Clifton Buildi	orporations				
				ve Center Circle			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAWH'S	ANGUS RANCH	LLC	
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now app Limited Liability Compan	oears on our records.) y)	
The Articles of Organization for this Limited Liability Florida document numberL0400017146	Company were filed on	MARCH 3RD 2004	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	<u>here</u> :	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Con	npany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:		ALL	
(Principal office address MUST BE A STREET ADD	RESS)		
		200	
		[T] <u>C</u>	To promise
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		D	
B. If amending the registered agent and/or registered agent and/or the new registered office add		n our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	02	, Florida	7:- C. J.
	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:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
<u>MGRM</u>	RAWLE SAWH	90-35 202ND STREET HOLLIS, NY 11423	Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	_
		TALLAHASSEE	- EB 77
 Dated11	ITH OF FEBRUARY 2011	FLORIDA	7
-		authorized representative of a member Mohan Sawh printed name of signee	

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Filing Fee: \$25.00