Florida Department of State

Division of Corporations Public Access System

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Account Number: 075350000514

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

PERRY INDUSTRIES, L.L.C.

Certificate of Status	0
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Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PERRY INDUSTRIES, L.L.C.		
(Name of the Limited Liability Compa (A Florida Limited)	my as it now appears on our reco Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company	·	and assigned
Florida document number L04000033062		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here;	
The new name must be distinguishable and end with the words "Lim"L.L.C."	uited Liability Company," the design	
Enter new principal offices address, if applicable:		ZIOO A
(Principal office address MUST BE A STREET ADDRESS)		HC B
Enter new mailing address, if applicable:	555 N. Byron Butler Pkwy.	
(Mailing address MAY BE A POST OFFICE BOX)	Perry, FL 32347	97
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.		enter the name of the ne
Name of New Registered Agent:	,	
New Registered Office Address:	(Enter Florida :	use and dunnal
	(Enter Florida)	an eer aaan coo)
	(City)	orida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	,	

(If Changing Registered Agent, Signature of New Registered Agent)

Page 1 of 2

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	<u>Name</u>	Address	Type of Action
мм	Joel K. Shugar, M.D.	P.O. Box 69 Perry, FL 32348	Add Remove
MGR	Daniel Shugar	555 N. Byron Butler Pkwy. Perry, FL 32347	Add Remove
MGR	Gary A. Shipman	555 N. Byron Butler Pkwy. Perry, FL 32347	ratē Add c Remove
			~ ~~
			Add Remove
			Add Remove
D. If an	nending any other information, enter c	hange(s) here: (Attach additional sheets, if	necessary.) ASCALLANAS
Dated _	August 28 .d	2008 .	3 28 A II: 17 SSEE, 100/10A
	Alan S. Gassman, a	eniber or authorized representative of a member as authorized representative yped or printed name of signee	

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Filing Fee: \$25.00