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J. BRYAN

OCT 1 2 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corpo		
SUBJECT:	Ehamlet LLC	
	Name of Limited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are submitted for filing.	
Please return all correspond	dence concerning this matter to the following:	
	Ishmael Hamlet	型
	Name of Person	
	1044 Sarlington aux	M.1:2
	KISSIM Mel F1 34758	
	E-mail address: (to be used for future annual report notification)	
For further information con	ncerning this matter, please call:	
lshmael	Hanlet 321, 689-3463	
Name of P	Person Area Code & Daytime Telephone Number	•
Enclosed is a check for the	•	
\$25.00 Filing Fee	(additional copy is enclosed) Certified	te of Status &
Registrati Division o P.O. Box	STREET/COURIER ADDRESS: tion Section of Corporations c 6327 see, FL 32314 See, FL 32301 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ANTI	LES OF O	NOANIZATI	O14	
	O	F		- m
	Hamle-	fllc		
(<u>Name of the Limited I</u> (A	L iability Compa Florida Limited L	ny as it now appears iability Company)	on our records.)	2
The Articles of Organization for this Limited Lia Florida document number		/	1 15/2004	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of I ham let	the limited liab	ility company here	:	
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Compar	y," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applica		LISSI	arlington mnec fi	34758
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	9 <u>0X)</u>	1044 CISSIW	barlingtor	7 CMF 34758
B. If amending the registered agent and/or registered agent and/or the new registered off			ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:	IN She	nael H	anlet_	71
New Registered Office Address:	1047	Sulingt	er Florida street ad	dress
	Cissi	mmee ""	, Florida	34718
		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

Λ

Title	Name	Address	Type of A	<u>ction</u>
estaent Nanager	shmael Hamlet	194 Darlington (W. L.	Add Remove	·
			Add Remove	:
	,		Add Remove	:
			Add Remove	;
			Add Remove	
			Add Remove	
D. If amendi	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)		
		P P P P P P P P P P	AMII: 21	
Dated	Signature of a member	or authorized representative of a member	<u></u>	
	Tyned	or printed name of signee	<u>. </u>	

Page 2 of 2

Filing Fee: \$25.00