

LD4000050018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

MAR 17 2010

EXAMINER



800172022298

03/15/10--01046--007 **60.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 MAR 15 AM 11:10

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ArnoldSmith, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peggy A. Arnold

Name of Person

ArnoldSmith, LLC

Firm/Company

410 Turkey Creek

Address

Alachua, FL 32615

City/State and Zip Code

pjarnold@cox.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peggy A. Arnold

Name of Person

at (386)

462-2583

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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**

ArnoldSmith, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on June 30, 2004 and assigned Florida document number L04000050018.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Big Cypress Resort, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

410 Turkey Creek

Alachua, FL 32615

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

410 Turkey Creek

Alachua, FL 32615

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR 15 AM 11:10

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Peggy A. Arnold

New Registered Office Address:

410 Turkey Creek

Enter Florida street address

Alachua

, Florida

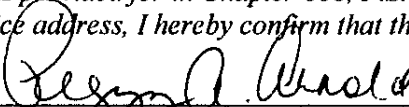
32615

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Treas.</u>	<u>Troy Smith</u>	<u>P.O. Box 177</u>	<input type="checkbox"/> Add
		<u>Epworth, GA 30541</u>	<input checked="" type="checkbox"/> Remove
<u>Treas.</u>	<u>Michael Wnek</u>	<u>526 Hillside Drive</u>	<input checked="" type="checkbox"/> Add
		<u>Auburndale, FL 33823</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

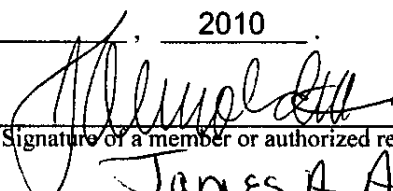
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Registered agent was A. Bice Hope, Esquire. He passed away last year.

We have updated the records to reflect the same.

Update: one member change; all others remain the same

Dated March 10, 2010



Signature of a member or authorized representative of a member

James A. Arnolds, III

Typed or printed name of signee