

L04000054739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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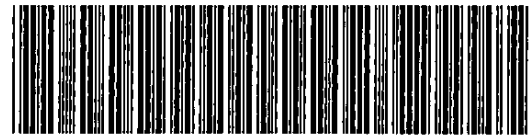
(Business Entity Name)

(Document Number)

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*Amend*

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AJH West Coast, 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:

Sherrilyn Fyock  
(Name of Person)

AJH West Coast, LLC.  
(Firm/Company)

5332 Barclay Ave.  
(Address)

Brooksville, FL 34609  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sherrilyn Fyock at ( 352 ) 686-9110  
(Name of Person) (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**

AJH West Coast, LLC.

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on July 22, 2004 and assigned document number LO4000054739.

**SECOND:** This amendment is submitted to amend the following:

Adding additional managing member "MGRM": Frank N. Fyock of 5332 Barclay Ave  
Brooksville, FL 34609 and is authorized and empowered along with present "MGRM"  
Sherrilyn C. Fyock to transact business on behalf of the company.

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TALLAHASSEE, FLORIDA

FILED

Dated Friday September 8, 2006.

*Sherrilyn C Fyock*  
Signature of a member or authorized representative of a member

Sherrilyn C. Fyock

Typed or printed name of signee

Filing Fee: \$25.00