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EXAMINER



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SECRETARY OF STATE TALLAMASSEE, FLORIDA

COVER LETTER

Registration Section

TO:

Division	of Corporations		
SUBJECT:	Camping or	n the Gulf Land LLC	
SUBJECT.		nited Liability Company	
٠			
The enclosed Artic	cles of Amendment and fee(s) are su	abmitted for filing.	
Please return all co	orrespondence concerning this matte	er to the following:	
		Michelle Ruddy	
		Name of Person	
		Bradco, Inc.	
		Firm/Company	
	;	3642 Peachtree Road	
		Address	
		Atlanta, GA 30319	
		City/State and Zip Code	
	mich	nelle@bradco-atlanta.com (to be used for future annual report notification)	
	E-mail address:	(to be used for future annual report notification)	
For further inform	ation concerning this matter, please	call:	
	Michelle Ruddy	at (404) 233-1676	
Ī	Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a chec	k for the following amount:	t .	
√ \$25.00 Filing F	Fee \$\bigsquare \\$30.00 \text{ Filing Fee & Certificate of Status}	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	ed)
.]]]	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

Camping on th	e Gulf Land LL	<u>.C</u>	<u> </u>
(Name of the Limited Liability Com (A Florida Limite	<u>pany as it now appea</u> d Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on	07/27/04	and assigned
Florida document numberL0400055741			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company her	<u>·e</u> :	
	and LLC		
The new name must be distinguishable and end with the words "Li"L.L.C."	imited Liability Compa	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			<u></u>
(Principal office address MUST BE A STREET ADDRESS)			S ==
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered		our records, enter t	he name of the nev
registered agent and/or the new registered office address h	<u>ere</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street add	ress
	Citv	, Florida	Zip Code
	$\cup uv$		LID COUC

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 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:

	<u>Name</u>	Address	Type of Action
			Add
	,		
			Remove
			— n
			D D am arts
. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if r	
	BRUNCY S.	2011	

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Filing Fee: \$25.00