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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

MAY - 5 2011

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Palm Bay Mobil, 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:

Frances C. Lowe

Name of Person

Guilday, Tucker, Schwartz & Simpson, P.A.

Firm/Company

3042 Crawfordville Highway

Address

Crawfordville, FL 32327

City/State and Zip Code

francie@francelowe.com

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

For further information concerning this matter, please call:

Frances C. Lowe

Name of Person

at ( 850 )

926-8245

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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Palm Bay Mobil, 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 7/30/2004 and assigned  
Florida document number L04000056808.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_

*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>
MGRM	Samuel E. Gornto	P.O. Box 440 Melbourne, FL 32902	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Teresa Gornto	P.O. Box 440 Melbourne, FL 32902	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Samuel E. Gornto Trust Agreement d/t/d 4/30/87	777 Oak Ridge Drive Indialantic, FL 32903	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Samuel E. Gornto Amended and Restated Trust d/t/d 5/13/02	777 Oak Ridge Drive Indialantic, FL 32903	<input checked="" type="checkbox"/> Add <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

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 11 MAY 2011  
 11:33 AM  
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

See attached Amendments Effective Date December 29, 2004

Re filing to correct the Amendment to the Articles of Organization

Filed on April 25, 2011

Dated 4/28, 2011

Samuel E. Gornto Trustee  
Signature of a member or authorized representative of a member

Samuel E. Gornto, Trustee

Typed or printed name of signee