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OPER-9 AM 9:57 ALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

cg. 2-9-09

COVER LETTER

SUBJECT: Graf		y Dave, LLC					
(Name of Limited Liability Company)							
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:					
	•						
	David G	a Hurst					
		(Name of Person)					
(Firm/Company)							
	5734 L	agustrum Lan	<u>e</u>				
	\circ	(Address)					
	- POIK C	ity, 72 3.	3868				
		(City/State and Zip Code)					
For further information c	oncerning this matter, please c	all:					
DIACU	/ 	n 201 110					
David G. H	Of Person)	at (<u>863) 286-40</u> (Area Code & Daytime T	Celephone Number)				
•		(· · · · · · · · · · · · · · · · · · ·				
Enclosed is a check for the	ne 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

TO:

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

FILED 09 FEB -9 AM 9:56 SECKETARY OF STATE TALLAHASSEE, FLORIDA

Graphics Plus	by Drule 11	TALLAM	
Graphics Plus (Name of the Limited Liabil) (A Florid	lity Company as it now appears la Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Florida document number <u>LOYOOOS80</u>	Company were filed on	772004 and assigned	
- 1011da document ilaninori <u>=0 10000 0 000</u>	are.		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company here:		
D.G. Hurst Tri	icking, LLC		
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited Liability Compan	y," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		·	
(Principal office address MUST BE A STREET ADI	DRESS)		
		•	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		r records, enter the name of the new	
•	•		
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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

ž

MGR = M MGRM =	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
,			Add Remove
			Add Remove
<u></u>			Add Remove
D. If amen	nding any other information, enter ch	ange(s) here: (Attach additional sheets, if necessor	nry.)
 			09FEB -9 FARY
Dated	7.eb. 9. 200	21. Olevat	M 9: 56 OF BTATE LE. FLORIDA
	David	nber or authorized representative of a member Hurst ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00