L04000061140

(Re	equestor's Name)				
• (Ac	ddress)				
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(Ci	ty/State/Zip/Phon	e #)			
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. HAMPTON

OCT 2 3 2008

EXAMINER

COVER LETTER

Division of Cor	porations		
SUBJECT Steads	st Passina As	sociatos	
SUBJECT: -TCOOP	St Resource As	nited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sam Butter		
	Sam Butter	(Name of Person)	
	And a	<i>M</i>	
•	Altaloma Asset	Munagement (Firth/Company)	
	151 Southhall La	ane Suite 210	
		(Address)	
	Maitland . FL	32 75) (City/State and Zip Code)	
		(City/State and Zip Code)	
For further information of	oncerning this matter, please of	call:	
San Butter		at (467) 539 4333	3
San Butter at (467) 539 4333 (Area Code & Daytime Telephone Number)			elephone Number)
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	□\$30.00 Filing Fee &	\$\$55.00 Filing Fee &	□\$60.00 Filing Fee,
_	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		(udditional copy is cholosod)	(additional copy is enclosed)
MAII.	ING ADDRESS:	STREET/COURIER	ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



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08 OCT 22 PM 2: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 2, 2008

SAM BUTLER ALTALOMA ASSET MANAGEMENT 151 SOUTHHALL LANE - STE 210 MAITLAND, FL 33751

SUBJECT: STEADFAST RESOURCE ASSOCIATES, LLC

Ref. Number: L04000061140

We have received your document for STEADFAST RESOURCE ASSOCIATES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or manager of the limited liability company.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 208A00052381

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STEADFAST RESOURCE ASSOCIATES

(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 Awast	18,2004	and assigned	
Florida document number <u>L0400061140</u>	·	0			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the li	mited liability comp	anv here:			
ALTALOMA ASSET MANAGEME	NT LIMITES	LIABIL	ITY Com	PANY	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability	y Company," the	e designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD	ORESS)		•		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office ad		ess on our rec	SECRETARY OF STATE TALLAHASSEEL FLORIDA	he name of the ne	
Name of New Registered Agent:				· .	
New Registered Office Address:					
	(Enter Florida street address)				
			_, Florida		
	(City)			(Zip Code)	
Now Designated Assetts Cignotype if changing Designate	and Agants				

New Registered Agent's Signature, il 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>:

MGR = Manager

MGRM = Managing Member Title **Address Type of Action** <u>Name</u> ☐ Add ☐ Remove **□** Add Remove Add Remove Remove 🗂 Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member John Samuel Ruffer
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00