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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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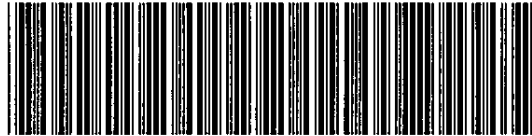
Special Instructions to Filing Officer:

L. SELLERS

SEP 23 2008

EXAMINER

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OFFICE OF THE
TALLAHASSEE FLORIDA

08 SEP 22 AM 8:01

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Floyd Knobs, 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:

Martha N Johns

(Name of Person)

Floyd Knobs, LLC

(Firm/Company)

660 Cox Rd., Ste 5

(Address)

Cocoa, FL 32926

(City/State and Zip Code)

For further information concerning this matter, please call:

Martha N. Johns

(Name of Person)

at (321) 633-4321

(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**

Floyd Knobs, 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 8/20/04 and assigned
Florida document number L04000061804.

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)

660 Cox Rd., Ste 5

Cocoa, FL 32926

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)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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>
MGR	Carl E. Johns, Jr.	660 Cox Rd., Ste 6 Cocoa, FL 32926	☐ Add ☒ Remove
MGR	Stephen Johns	783 Killarney Court Merritt Island, FL 32953	☐ Add ☒ Remove
MGRM	Martha N. Johns	4035 Quail Path Rd Cocoa, FL 32926	☒ Add ☐ Remove
MGRM	Perkane Johns	783 Killarney Court Merritt Island, FL 32953	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated September 17, 2008

Martha N. Johns
Signature of a member or authorized representative of a member

Martha N. Johns

Typed or printed name of signee

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TALLAHASSEE FLORIDA
SECRETARY OF STATE