

L04000069628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

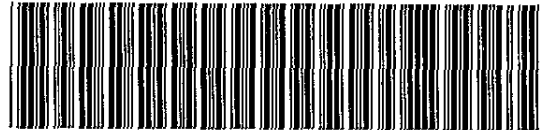
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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BIDDISCOMBE HOLDINGS, 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:

JOHN H. MELVILLE

(Name of Person)

BIDDISCOMBE HOLDINGS, LLC

(Firm/Company)

14450 46TH STREET N, STE 116

(Address)

CLEARWATER FL 33762

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN MELVILLE

(Name of Person)

at ( 727 )

299-9077

(Area Code & Daytime Telephone Number)

2005 JUN - 9 P 3: 0  
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TALLAHASSEE, FLORIDA

FILED

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)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

BIDDISCOMBE HOLDINGS, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on SEPTEMBER 23, 2004 and assigned document number L04000069628.

**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

THE NAME OF THE COMPANY, BIDDISCOMBE HOLDINGS, LLC IS HEREBY CHANGED TO:

BIDDISCOMBE INTERNATIONAL, LLC

WITH EFFECT JUNE 10, 2005.

**FILED**  
2005 JUN -9 P 3:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated JUNE 6, 2005.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

JOHN H. MELVILLE

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**