## L04000069826

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## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	SK Fa	airgreen, LLC			
	**:	ited Liability Company	•		
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing			
Please return all corresp	oondence concerning this matter	r to the following:			
		Hollis L. Henegar			
		Name of Person			
SK Fairgreen, LLC					
Firm/Company					
		Address			
	St.	St. Petersburg, FL 33713			
City/State and Zip Code					
•	hollyh E-mail address: (	enegar@designbuild.co to be used for future annual report i	m notification)		
For further information	concerning this matter, please of	call:			
	lis L. Henegar		327-1089		
Name	or reison	Alea Code & Da	unic retephone value		
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 enck	Seed) \$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

	airgreen, LLC		
( <u>Name of the Limited Liability (</u> (A Florida Lii	Company as it now appe mited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Con Florida document numberL0400069826	mpany were filed on	09/20/2004	and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited	ed liability company he	ere:	
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Comp	pany," the designation "Ll	_C" or the abbreviation
Enter new principal offices address, if applicable:			· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDRE	<u> </u>		
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 addre		our records, enter th	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			09 €
	E	nter Florida street addr , Florida	PIL PANS
New Registered Agent's Signature, if changing Registered			FLORIO
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	complete performance ent as provided for in C	e of my duties, and I ar Chapter 608, F.S. Or, i	n familiar with and f this document is

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> Address Type of Action MGRM Clark H. Scherer, III ☐ Add 2152 14th Circle North St. Petersburg, FL 33713 ✓ Remove CHS Asset Holdings, LLC MGRM 2152 14th Circle North ✓ Add St. Petersburg, FL 33713 Remove  $\prod Add$ ☐ Remove ☐ Add Remove \_\_\_Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 19 2009 Signature of a member or authorized representative of a member Clark H. Scherer, III Typed or printed name of signee

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Filing Fee: \$25.00