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Division of Corporations
Fax Number : (850) 617-6380

Account Name : MATTHEWS & JONES, LLP
Account Number : I19990000039
Phone : (850) 837-3662
Fax Number : (850) 654-1634

Email Address: _____

J. S. S. FEB 03 2003

14 JUL 31 PM 12:39

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COR AMND/RESTATE/CORRECT OR O/D RESIGN
COLT ONE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

14 JAN 31 AM 9:55
SECURITY STATE
TALAHASSEE FLORIDA

Help

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

Colt One, 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 November 22, 2004 and assigned
Florida document number L04000086100

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Colt Development, LLC

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)

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 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
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		_____	☐ Remove

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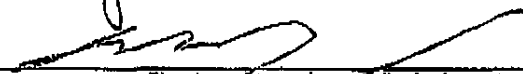
T-145 P0004/0004 F-139

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated January 31, 2014



Signature of a member or authorized representative of a member
Mike Buckingham, Managing Member

Typed or printed name of signer

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Filing Fee: \$25.00

14 JAN 31 AM 9:05
TALLAHASSEE, FLORIDA