## 604000091749

(Requestor's Name)					
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(0) (0) (17) (17)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
3					





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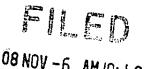
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SECRETANT OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: Armstro	SUBJECT: Armstrong Relocation Company, Orlando, LLC						
		ited Liability Company)					
,							
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspo	ndence concerning this matter	to the following:					
	James Murray						
		(Name of Person)					
Armstrong Relocation Company, Orlando, LLC							
		(Firm/Company)					
9550 Parksouth Court Suite 250							
		(Address)					
	Orlando, FL 32837						
		(City/State and Zip Code)					
For further information c	oncerning this matter, please c	all:					
lamas Murray		at ( ) 407-595-7883					
James Murray (Name of Person)		at (at () 407-355-7683 (Area Code & Daytime Te	elephone Number)				
Enclosed is a check for the	ne 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)				
Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 issee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns				

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION 08 NOV -6 AM 10: 48 **OF**



SECRETARY OF STATE TALLAHASSEE FLORIDA

Armstrong Relocation Company, Orlando, 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 Liabil	ity Company were filed on 12/20/04	and assigned	
Florida document number <u>L04000091749</u>	<u>.</u>		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable	::		
(Principal office address MUST BE A STREET A	DDRESS)		
		_	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
B. If amending the registered agent and/or r registered agent and/or the new registered office		ords, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	(Enter Fla	rida street address)	
	,		
<del></del>	(City)	_, Florida(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 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

Title ·	<u>Name</u>	Address	Type of Action
MGR	Tom Hinkley	9550 Parksouth Court Suite 250 Orlando, FL 32837	Add Remove
MGR	James Murray	9550 Parksouth Court Suite 250 Orlando, FL 32837	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets, if necessary.	1ALL AHASSE FLORIDA
Dated O		nember or authorized representative of a member  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00