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SECRETARY OF STATE

J. SAULSBERRY EXAMINER DEC 30 2011

## **COVER LETTER**

TO:

Registration Section \*

Tallahassee, FL 32314

P.O. Box 6327

Division of C	Corporations					
SUBJECT:	Cowan Hol	ding Company, LLC				
Sobject		nited Liability Company	_	_		
The enclosed Articles	of Amendment and fee(s) are so	ubmitted for filing.				
Please return all corre	spondence concerning this matte	er to the following:				
		Joel H Cowan Jr		_		
		Name of Person				
		Firm/Company		_		
		102 Pebblestump Pt.	,	<b>-</b> ₹	·~>	
		Address	•	SECR	2011 DEC 28	-
	Pea	chtree City, Georgia 30269		HAS	. J.	1
		City/State and Zip Code		RY.	83	
	E-mail address:	jhc2009@gmail.com (to be used for future annual report notification)	on)	무 당		
For further information	on concerning this matter, please	call:		STATE: LORIDA	9:01	
J	oel H Cowan Jr	at (	7-7605		_	
Nan	ne of Person	Area Code & Daytime Te	lephone Num	ber		
Enclosed is a check for	or the following amount:					
<b>№</b> \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certif	Filing Fe icate of S ied Copy ional cop	Status & /	
Reg	AILING ADDRESS: gistration Section vision of Corporations	STREET/COURIER Registration Section Division of Corporation		:		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compar (A Florida Limited L	Company, LL ny as it now appear liability Company)	C s on our record	<u>s.</u> )	
The Articles of Organization for this Limited Liability Company Florida document numberL0400091962	were filed on	12/20/200	<b>4</b> and a	ssigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Compa	ny," the designat	ion "LLC" or th	e abbreviation
Enter new principal offices address, if applicable:	102 Pebblest	ump Pt.	BII D Secr	
(Principal office address MUST BE A STREET ADDRESS)	Peachtree Cit	ty, Georgia 3	026	
Enter new mailing address, if applicable:	102 Pebblest	ump Pt.	RY OF STAT SEE. FLORI	
(Mailing address MAY BE A POST OFFICE BOX)	Peachtree Cit	ty, Georgia 3	0269	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		our records, <u>er</u>	iter the name	of the new
Name of New Registered Agent:				
New Registered Office Address:	En	ter Florida stree	et address	
	, Florida			
	City		Zip Co	de

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 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	Stone Resources Group, LL	102 Pebblestump Pt. Peachtree City, Georgia 30269	✓ Add ☐ Remove
	-		Add Remove
*******			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
<del></del>	T AMA		Add Remove
<del></del>			Add Remove
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessar	2011 DEC
		NOSEE, FLORID	C28 AM 91 C
Dated	December 26, 20	11 MAN	
	Signature of a member	or authorized representative of a member	
		oel H Cowan Jr	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00