05/20

(Requestor's Name)				
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(City/State/Zip/Phone #)				
(Only/State/2.p/) Notice #/				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Document Number)				
Certified Copies Certificates of Status				
Common copies				
Cupaint lundrustians to Filips Officer				
Special Instructions to Filing Officer:				
A. I INIT				

AUG 18 2008

EXAMINER

Office Use Only



600134308676

08/14/08--01016--022 **30.00



August 8, 2008

To whom this may concern:

Please accept this as my contact information. Please call if you have any questions.

Regards,

Waylon Henwood

TAIL AHASSEE, FLORIDA

Same Same

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Custom	n Sight & Sounds L.C (Name of Lim	C. ited Liability Company)		8
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Waylon Henwood		ZOOO	7
	Custom Sight & Sounds	(Name of Person) L.C.	AHASSI AHASSI	Carlina de la ca
	Outline Original Country	(Firm/Company)	10. Line 10.	0
	10407 Docksider Drive V	(Address)	39	
	Jacksonville, FL 32257	(City/State and Zip Code)		
For further information of	concerning this matter, please c	all:		
Waylon Henwood		at (904) 425-5149		
(Name	of Person)	(Area Code & Daytime T	'elephone Number)	
Enclosed is a check for t	he 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 State Certified Copy (additional copy is	
Regist Divisi P.O. B	ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons r Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our r	ecords.)		
nuonity company)			
were filed on January 14, 2	2005	and assigned	
ility company here:			
ted Liability Company," the d	esignation	"LLC" or the abbrevi	
10407 Docksider Drive V	/est ∺	708	
Jacksonville, FL 32257		<u> </u>	
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(Entay Flavi	da straat	addrace)	
(Enter Florida street address)			
	Florida		
	illity company here: ited Liability Company," the di 10407 Docksider Drive W Jacksonville, FL 32257 fice address on our recore:	10407 Docksider Drive West ST Jacksonville, FL 32257	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	Managing Member		
<u>Title</u>	Name	Address	Type of Acti
			☐ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			STATE 3 Add Remove
D. If amen	nding any other information, enter chan	nge(s) here: (Attach additional	l sheets, if necessary.)
-			
_			
Dated	Month	·	•
	Signature of a member way of Herwood Type	per or authorized representative of ed or printed name of signee	f a member

Page 2 of 2

Filing Fee: \$25.00