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(City/State/Zip/Phone #)	N5/06/N501053003 <b>**</b> 50.00			
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W. P. Verifyer DCC				

## TRANSMITTAL LETTER

TO: Registration Section

1 - \*

Division of Corporations

SUBJECT: Goodfellows of Lake County, LLC

(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert L. Shear

(Name of Person)

Robert L. Shear, P.A.

(Firm/Company)

2650 McCormick Dr., Suite 130

Tallahassee, Florida 32399

		(Address)		
Cle	earwater, FL 33759			5.5
(City/State and Zip Code)				, i
For further information	concerning this matter, please	call:		•
Robert L. She	ar	at ( 727 ) 712-	1228	- <u>-</u> -
······································	(Name of Person)	(Area Code & Day	time Telephone Number)	
. Enclosed is a check for the	e following amount:			
€ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee, Certificate of Status &amp;</li> <li>Certified Copy (additional copy is enclosed)</li> </ul>	sed)
	CET ADDRESS: tration Section	MAILING AD		
Division of Corporations 409 E. Gaines Street		Division of Corp P.O. Box 6327		

Tallahassee, Florida 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Goodfellows of Lake County, LLC

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Dated April 28

(Present Name) (A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on January 28, 2005 and assigned document number L05000009185

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

Article II - Address The mailing address of the principal office of the Limited Liability Company is:

P.O. Box 1829 Oldsmar, FL 34677

2005

**9- 10- 10** 

2 () ()

Signature of a member or authorized representative of a member Robert L. Shear

Filing Fee: \$25.00

Typed or printed name of signee