## L05000010828

(Re	equestor's Name)			
. (Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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J. HARRIS



STEPHEN C. BOOTH J. HARRIS COOK DAMIEN D'ASCENZIO KRISTINA M. HUDSON RIDGEWOOD EXECUTIVE CENTER
7510 RIDGE ROAD
PORT RICHEY, FLORIDA 34668
Phone (727) 842-9105
Fax (727) 848-7601

June 11, 2015

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314-6327

Re: Woods Investments, LLC

To Whom It May Concern:

Enclosed you will find an Amendment to the Articles of Organization to the above referenced, along with a check in the amount of \$25.00, a copy of said Amendment and a self addressed stamped envelope.

Please file the Amendment and return the copy "file stamped" in the enclosed envelope.

Thank you and if any further information is needed please feel free to contact my office.

Sincerely,

BOOTH & COOK, P.A

urie A. Nezbeth

encl.



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WOODS INVESTMENTS, LLC	
(Name of the Limited Liability Company as it is (A Florida Limited Liability (	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fi	led on 1-25-05 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability cor	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Comp	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
Enter new mailing address, if applicable:	
Muiling address MAY BE A POST OFFICE BOX)	5 <b>.</b>
	5 5
3. If amending the registered agent and/or registered office ad registered agent and/or the new registered office address here:	dress on our records, enter the name of the na
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	The set de
Cip	, Florida

## 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
PRES	RON T. WOODS	RON T. WOODS 14440 DIAMOND RIDGE CT	
		HUDSON, FL 34667	■ Remove
			□ Change
VP MARYANN E. WOOD	MARYANN E. WOODS	14440 DIAMOND RIDGE CT	
		HUDSON, FL 34667	■ Remove
			☐ Change
MGR RONALD WOODS	RONALD WOODS	14440 DIAMOND RIDGE CT	■ Add
		HUDSON, FL 34667	□ Remove
		Change	
MGR MARYANN WOODS	MARYANN WOODS	14440 DIAMOND RIDGE CT	<b>=</b> Add
		HUDSON, FL 34667	Remove
		<del></del>	☐ Change
		-	Add
		D Remove	
	<del></del>	Ghange C	
		Change Add Co	
			☐ Change

Filing Fee: \$25.00