65000021495

	_
(Requestor's Name)	
(Address)	
(1881833)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	Ì
	-
•	

Office Use Only



500059992925

10/04/05--01047--019 **25.00

05 OCT -1, PH 12: 37

DIVISION OF MANAGRATION -

W5 21495

COVER LETTER

TO: Registration S Division of C			
SUBJECT:	Sip N (Name of Lin	Dip LL nited Liability Company)	
	of Amendment and fee(s) are subr	-	
_	Chris h	larne of Person)	
_	· ·	inn/Company)	
_	7115 Conestage Tollahossee F	(Address) 2309 tate and Zip Code)	OS OCT - SELVATA
For further information	concerning this matter, please cal		-4 PHI2: 37
	(Name of Person)	at () (Area Code & Daytim	e Telephone Number)
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sio N Dio LLC	
(Present Name) (A Florida Limited Liability Company)	
(A Florida Limited Liability Company)	

FIRST:	The Articles of Organization were filed on 3/3/05 and assigned document number <u>L 0 5 0 0 00 21</u> . 475	
SECOND:	This amendment is submitted to amend the following:	
	To add a managing member, Chief Operations Office	r
	Dr. W. Ira Wilson	
	3407 E Henderson Way Es &	
	Clarksville, TN 37042	نيان المانية المانية
	\$\$\frac{1}{2} \frac{1}{2} \fra	7
	FLO N	
	Rio.	7
Dated	10/4/ . 05	
	CLVI	
	Signature of a member or authorized representative of a member	
	Chris Wilson Typed or printed name of signee	
	Typed or printed name of signee	

Filing Fee: \$25.00