L05000021952

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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COVER LETTER

TO: Registration Division of C	section Corporations			
SUBJECT:	Stanley	Holdings LLC		
	Name of Limi	ted Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corre	spondence concerning this matter	to the following:		
		Diane Lorden Name of Person		
		Stanley Holdings LLC		
Firm/Company				
1133 Bal Harbor Blvd. Suite 1139-179				
Address				
Punta Gorda, FL 33950 City/State and Zip Code				
	E-mail address: (1	to be used for future annual report notif	ication)	
For further information	n concerning this matter, please of	all:		
	Diane Lorden	at (979) Area Code & Daytim	574-3534	
Nan	ne of Person	Area Code & Daytim	e Telephone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 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

FILED SECRETARY OF STATE DIVISION OF CURPCRATIONS

OF 12 JAN 24 AM 10: 50

Stanley	y Holdings LLC		
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appe mited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liability Cor Florida document numberL05000021952	mpany were filed on	March 4, 2005	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company h	ere:	
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Com	pany," the designation "LI	.C" or the abbreviation
Enter new principal offices address, if applicable:		144	
(Principal office address MUST BE A STREET ADDRE	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register		our records, enter the	e name of the new
registered agent and/or the new registered office addre	ss he <u>re</u> :		
Name of New Registered Agent:			
			<u>.</u>
New Registered Office Address:	Enter Florida street address		
		, Florida	
	City	, 1101144	Zip Code
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent an the provisions of all statutes relative to the proper and accept the obligations of my position as registered age.	complete performance nt as provided for in C	e of my duties, and I am Chapter 608, F.S. Or, if	familiar with and this document is
being filed to merely reflect a change in the registered	office address, I hereb	y confirm that the limit	ed liability

If Changing Registered Agent, Signature of New Registered Agent

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> Name **Address** Type of Action John and Sandra Lorden Member 3501 Areca Street Punta Gorda, FL 33950 **№** Remove Diane Lorden Member 1133 Bal Harbor Blvd. Remove Suite 1139-179 Punta Gorda, FL 33950 Add Remove Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 17 2012 Dated Signature of a member or authorized representative of a member oshua∕Lorden

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Typed or printed name of signee

Filing Fee: \$25.00