## L05000024824

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PICK-UP WAIT MAIL						
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**EXAMINER** 

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ECRETARY OF STATE

## **COVER LETTER**

SUBJECT: Anthony	0						
(Name of Limited Liability Company)							
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspon	ndence concerning this matter	to the following:					
·	-	·					
	Anthony S. Fletcher						
(Name of Person)							
Anthony S. Fletcher "LLC"							
		(Firm/Company)					
	0000						
	3693 Landers Street (Address)						
		, ,					
Big Pine Key, Florida 33043							
(City/State and Zip Code)							
For further information co	oncerning this matter, please c	all:					
Anthony S. Fletcher		at ( 305 ) 304-0388					
(Name o	of Person)	(Area Code & Daytime T	'elephone Number)				
Enclosed is a check for th	ne following amount:						
☑ \$25.00 Filing Fee	Certificate of Status	□\$55.00 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

TO:

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

Anthony S. Fletcher "LLC"			
(Name of the Limited (A	Liability Compan Florida Limited Li	y as it now appears on our record ability Company)	<u>ls.</u> )
The Articles of Organization for this Limited Li	ability Company	were filed on 03-11-2005	and assigned
Florida document number L05000024824	·		
This amendment is submitted to amend the follow	owing:		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
Same			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limit	ed Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	Same	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:		Same	
(Mailing address MAY BE A POST OFFICE	BOX)		· · · · · · · · · · · · · · · · · · ·
			Σω
			AN A . SECOND
B. If amending the registered agent and/or the new registered of	•	· -	nter the name of the new
		•	SSE SSE
Name of New Registered Agent:	Same		
New Registered Office Address:	3693 LA	(Enter Florida str	eet address)
	Big Pine	Key Flori	ida F1, 33043
	9	(City)	(Zip Code)
New Registered Agent's Signature, if changing I	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 addyless, 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 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	<u>Address</u>	Ty	pe of Action
<u>Mar</u>	Anthony Fletcher	3693 Landers Street	<b>_</b>	
5		Big Pine Key, Florida 33043		Remove
Marm	Marilyn Fletcher	3693 Landers Street		Add
•		Big Pine Key, Florida 33043		Remove
<u>Marm</u>	Jessica Fletcher	3693 Landers Street		Add Remove
Marm			<del></del>	Kemove
Mgrm	Michael J. Almquist	30625 5th Avenue Big Pine Key, Florida 33043	<b>o</b> [7]	Add Remove
<del></del>				Add Remove
	·		,	
<del></del>				Add Remove
D. If amendi	ing any other information, enter char	nge(s) here: (Attach additional sheets, if necess		
N/A				
···	<b>***</b>			
سبعيدهم				
<u></u>		All productions and the second		
Dated May 29	9, , 2008	3	SEC	08
	athy & Itel	in	AHAS	AUG -
•	•	per or authorized representative of a member	338	<b>*</b>
	Anthony S. Fletcher Type	ed or printed name of signee		<b>₹</b> M
	-21	Page 2 of 2	ORIC	8: 55
		Filing Fee: \$25.00	<b>≫</b>	