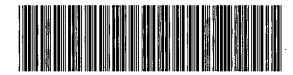
## L06000026083

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Amend LO5-26083



N. CAUSSEAUX

SEP 3 0 2009

**EXAMINER** 

## **COVER LETTER**

то:	Registration Se Division of Cor								
SUBJECT: Second Carlson Enterprises LLC									
Name of Limited Liability Company									
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.						
Please re	eturn all correspo	ndence concerning this matter	to the following:						
	Lewis M. Oliver III, Esq. Name of Person								
Quinones & Oliver, P.L. Firm/Company									
1 mile company									
11549 Lake Underhill Road									
Orlando, FL 32825  City/State and Zip Code									
							E-mail address: (	oliver@gaolaw.com to be used for future annual report no	tification)
					For furt	her information c	oncerning this matter, please o	call:	
	L	.ew Oliver	at (_407_)	249-5050					
Name of Person			Area Code & Dayt	ime Telephone Number					
		e following amount:							
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	Sed.000 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COUI Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle					

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Second Carlson Enterprises LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 03/15/2005 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ L05000026083 Florida document number \_\_\_\_ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 **Title** <u>Name</u> <u>Address</u> Type of Action MGR Kathleen S. Carlson 1243 Aquila Loop Celebration, FL 34747 Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 23 Signature of a member or authorized representative of a member Lewis M. Oliver III Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00