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07/21/08--01006--017 **25.00

M. THOMAS

JUL 222008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: CENTR	RAL HOLDING LLC (Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Robert J Benson	QI CD	
		(Name of Person)	
	CENTRAL HOLDING LL	С	_
		(Firm/Company)	
	P.O. Box 780245		DB JUL 21 PM 2: 17
		(Address)	
	Orlando, FL 32878	(City/State and Zip Code)	OF ST
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Robert J Benson		at (407) 782-1069	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	he following amount:		
☑ \$25.00 Filing Fee	\$30.00 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		CTDCFT/COUDIED	ABBRECO

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

CENTRAL HOLDING LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our record Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited Liability Compa		and assigned
Florida document number L05000044544		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and end with the words "L" "L.L.C."	imited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		- CO P C
(Principal office address MUST BE A STREET ADDRESS		78.2
Enter new mailing address, if applicable:		温温
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the new
Name of New Registered Agent:		·
New Registered Office Address:		· -
	(Enter Florida si	treet address)
		rida
	(City)	(Zip Code)

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.

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM .	Orange Group Investments, Inc	2433 Sherbrooke Road Winter Park, FL 32792	Add Remove
MGRM_	FBN Investments, LLC	P.O. Box 291579 Port Orange, FL 32127	₽ Add ₽ Remove
	<u> </u>		Add Remove
			Add Removed
	<u></u>		JUL 21 PM 2: 17
			Addom Addom Remove
D. If an	nending any other information, enter chan	nge(s) here: (Attach additional sheets, if necessary	
			_
Dated	07-17 2	008 H	
	Robert J Benson	et or authorized representative of a member	

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Filing Fee: \$25.00