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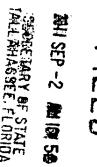
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T. CLINE

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EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Florid	a Native, LLC	
	Name of Lim	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	abmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following:	
		Steven D. Metz	
		Name of Person	
		Florida Native, LLC	
	 	Firm/Company	
		5980 37th Street	
		Address	
		Vero Beach, FL 32966	
		City/State and Zip Code	
	E-mail address: (floridanative@att.net (to be used for future annual report notification)	
For further information	concerning this matter, please	Žá 🔐	Page 10
St	even D. Metz	at (772) 446-2740	CHORROWANG.
Name of Person		Area Code & Daytime Telephone Number	
		FLOR	m
Enclosed is a check for	the following amount:	ORIG	
 ▼ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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 ARTICLES OF ORGANIZATION **OF**

	Florida Na					
(Name of the Limited	Liability Compa Florida Limited L	ny as it now appear Liability Company)	s on our records.)			
The Articles of Organization for this Limited L Florida document numberL0500005	June 9, 2005	and	d assign	ed		
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	ility company here	e:			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Compar	ny," the designation	"LLC" or	the abbr	reviation
Enter new principal offices address, if applic	5980 37th Str	eet				
(Principal office address MUST BE A STREE	TADDRESS)	Vero Beach, F	L 32966	34	25	··
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or the new registered of	or registered of		ur records, <u>enter</u>	CHETARY OF STATE name the name	SEP - 2	he new
Name of New Registered Agent:	Steven D. Metz					
New Registered Office Address:	5980 37th S		er Florida street aa	dress		
	V					
	ero Beach City	, Florida _	Zip C	FL Code		
New Registered Agent's Signature, if changing F	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action** Title ' **Name Address MGRM Douglas Marine** 1416 48th Court ☐ Add Vero Beach, FL 32966 ✓ Remove Steven D. Metz MGRM 5980 37th Street ✓ Add ☐ Remove Vero Beach, FL 32966 ☐ Add _ Remove Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) August 25, 2011 Dated

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00

Signature of a member or authorized representative of a member

Steven D. Metz