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RECRETARY OF STATE

COVER LETTER

	egistration Se ivision of Cor			
SUBJECT	. <u>Mur</u>	PHYS LAW (Name of Lim	P127A LLC ited Liability Company)	
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retur	m all correspo	indence concerning this matter	to the following:	
For further		MURPHY'S I MURPHY'S I IIDGA X LEY WES oncerning this matter, please concerning this matter concerning the please concerning this matter, please concerning this matter, please concerning this matter, please concern	(Name of Person) PWP127A UC (Firm/Company) EY PLAZA (Address) T FL 330 (City/State and Zip Code) all: at (705) 896-36 (Area Code & Daytime To	TALLAHASSEE, FLORIDA
Enclosed is	a check for the	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)
	Registr Divisio P.O. B	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MURPHY'S LX	IW PI	22A U	C_		·—
(<u>Name of the Limited Lial</u> (A Flor	illity Company ida Limited Lia	bility Company)			
The Articles of Organization for this Limited Liability Florida document number <u>LU500061</u>		ere filed on	6/21/03	and	d assigned
This amendment is submitted to amend the followin	g:				
A. If amending name, enter the new name of the	<u>limited liabili</u>	ty company her	<u>re</u> :		
The new name must be distinguishable and end with the "L.L.C."	words "Limited	Liability Compa	any," the design	arion "LIG" or	the abbreviation
Enter new principal offices address, if applicable	:	1106A	KEYF	EAZA	i i
(Principal office address MUST BE A STREET A)		KEY u	JEST 1	332/	ΣΨΟ
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	Ω	1106A KEY W	KEY F	で 第二 第一 第一 第一 第一 第一 第一 第一 第一 第一 第一 第一 第一 第一	OP&
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on	our records,	enter the nam	ne of the nev
Name of New Registered Agent:				 	
New Registered Office Address:	1106F	KEY	PLAZA nter Florida sti	reet address)	The state of the s
_	KEYW	EST (City)	, Flor		DYD 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 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:

<u>'itle</u>	<u>Name</u>	Address	Type of Action
	·		Add Remove
			Add Remove
·			Add Remove
			Add Remove
		,	Add Remove
			Add Remove
. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if neces.	Sary HAS BEE
			A II: 11
Dated 5	25-08	*	
<i>-</i> .	Murphy D. Ran 50 Types		

Page 2 of 2

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