L05000077980

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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DIVISION OF CORPORATIONS
08 JAN 16 PM 2: 04

J. BRYAN

JAN 1 7 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Co				
SUBJECT: PALM P	ROFESSIONAL, LLC			
	(Name of Lim	ited Liability Company)		
	Amendment and fee(s) are sub	, and the second		
	JOHN JAY WATKIN	S		
		(Name of Person)		
	JOHN JAY WATKIN			
		(Firm/Company)		
	P.O. BOX 250			SELANIS
		(Address)		英點
	LABELLE FL 3397			6 08/1
		(City/State and Zip Code)		PA ST
For further information of	concerning this matter, please c	all:		SECRETARY OF STATIONS NVISION OF CORPORATIONS OB JAN 16 PM 2: 04
JOHN JAY WATK		at (863) 675-4424		_
(Name	of Person)	(Area Code & Daytime	Telephone Number)	
Enclosed is a check for t	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 St Certified Copy (additional copy	atus &

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

PALM PROFESSIONAL, LLC
(Name of the Limited Liability Company as it now appears on our records.)

(A FI	orida Limited Liability Company)		
The Articles of Organization for this Limited Liab	ility Company were filed on 08/09/2	2005 and assigned	
Florida document number <u>L05000077980</u>	,	SECRITION OF SECRI	
This amendment is submitted to amend the follows	ing:	SOUS STORY OF STATE OF STATE OF STATE OF STATE OF CORPORATION OF C	
A. If amending name, enter the new name of the	e limited liability company here:	2: 0	
PALM PRO, LLC		# 50 ·	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company,"	the designation "LLC" or the abbreviation	
L.L.C.			
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered at the provisions of all statutes relative to the propaccept the obligations of my position as register being filed to merely reflect a change in the registery company has been notified in writing of this change.	gent and agree to act in this capact per and complete performance of m red agent as provided for in Chapte istered office address, I hereby con	y duties, and I am familiar with and er 608, F.S. Or, if this document is	
	(If Changing Registered Agent, Si	ignature 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

<u>itle</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
			Add Remove
			Add Remove
If amend	ling any other information, enter change((s) here: (Attach additional sheets, if necessary.)	SECRET DIVISION O
_			FILED STATE SECRETARY OF STATE SECRETARY OF CORPORATE SECRETARY OF STATE SECRETARY OF STA
_			ONS -
ated JANI	JARY 14 , 2008	·	
	Signature of Inember of JOHN JAY WATKINS	r authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00