# 1050000 92480

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusitess Ethity Natile)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
المامل
1924
Office Use Only



900062309909

12/21/05--01020--008 \*\*25.00



# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: 531 Duval, LLC
(Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:
Colby Ward
(Name of Person)
531 Duval, LLC
(Firm/Company)
P.O. Box #17696
(Address)
Jacksonville, FL 32245
(City/State and Zip Code)
(City/State and Zip Code)  City/State and Zip Code)  For further information concerning this matter, please call:
Colby Ward  at (904 ) 710-2607
Colby Ward  at 904 710-2607 3 3 5 5 6 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \tag{\$30.00 Filing Fee & \$\ \tag{\$55.00 Filing Fee & \$\ \tag{\$60.00 Filing Fee.} \tag{\$60.00 Filing Fee.} \$certificate of Status & \$\ \tag{\$certificate of Status & \$\ \tag{

## 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

# 05 DEC:21 AM 9: 46

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

30	(Present Name)
	(A Florida Limited Liability Company)
FIRST:	The Articles of Organization were filed on 9/21/2005 and assigned document number L05000092680 and assigned
SECOND:	This amendment is submitted to amend the following:
	ARTICLE V - Currently lists Ward Investments, LLC as the MGR.
	Ward Investments should no longer be listed as the manager.
	This leaves Colby Ward and Joseph Ward as sole managing members.
	200
	<del></del>
. De	cember 15th 2005
Dated De	, 2000
	Signature of a member or authorized representative of a member
	Digitality of a memori of audiorized representative of a memori
	Colby Ward - Manager
	Typed or printed name of signce

Filing Fee: \$25.00