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TO MAY 21 MIS: L7

J. BRYAN

MAY 21 2010

EXAMINER



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CMerald Breeze Holdings, CLC 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:
Caig A Roberton
Everald Breze Holdings, CC
2846 A Remington Green Circle
Tallahassa A 32308 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Croug A Code & Daytime Telephone Number at 650 668-4668 Area Code & Daytime Telephone Number
Enclosed is a check for the 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, 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 TO ARTICLES OF ORGANIZATION OF

Emercial Company as it now appears on our records.

(A Florida Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10-14-2005 and assigned

Florida document number COSOO/O/US

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

EMPCULA BYON Registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address on our records, enter the name of the new registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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:

4 11 K

	<u>Name</u>		<u>Address</u>	Type of Action
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Filing Fee: \$25.00