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(Requestor's Name)							
(Ad	dress)						
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(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
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(Do	cument Number)						
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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11/04/10--01018--013 **25.00

B. KOHR

NOV - 8 2010

EXAMINER

10 NOV -4 PM 1: 03

SECRETARY OF STATE IVISION OF CORPORATION

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJ	ECT:	A	AY, LLC	9,0
			ted Liability Company	ONOLL ST.
The en	closed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspon	idence concerning this matter	to the following:	
			Susan A. Stone	
			Name of Person	
			AY, LLC	
			Firm/Company	
		359	1 Waterchase Way Eas	t
			Address	
			acksonville, FL 32224	
			City/State and Zip Code	
		SUS E-mail address: (1	anastone@yahoo.com	notification)
For fu	ther information co	oncerning this matter, please c	all:	
		an A. Stone	at (_904_)	881-2500
	Name of	Person	Area Code & Da	aytime Telephone Number
Enclos	ed is a check for the	e following amount:		
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc.	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		NG ADDRESS:	STREET/CO Registration S	PURIER ADDRESS: Judgment

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•				7.00	
/Name of the Limites	AY, I	LLC '			
(Name of the Limited	A Florida Limited I	ny as it now appea: Liability Company)	rs on our records.)	TO ONE	
The Articles of Organization for this Limited L	iability Company	were filed on	10/17/2005	and assigned.	
		were fried on	707111200	and assigned	
Florida document numberL0500010		,		and assigned	
This amendment is submitted to amend the following	lowing:			_	
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>·e</u> :		
The new name must be distinguishable and end will.L.C."	ith the words "Limi	ited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		Susan A. Sto	Susan A. Stone		
(Principal office address MUST BE A STREI	ET ADDRESS)	3591 Waterchase Way East			
		Jacksonville,	FL 32224		
T				·	
Enter new mailing address, if applicable:	Susan A. Stone				
(Mailing address MAY BE A POST OFFICE BOX)		3591 Waterchase Way East			
	Jacksonville, FL 32224				
B. If amending the registered agent and, registered agent and/or the new registered of			our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:	Susan A. S	tone			
New Registered Office Address:	3591 Waterchase Way East				
		En	ter Florida street add	ress .	
•			, Florida	32224	
		City		Zip 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 orderss, 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 Title . Name Address **Type of Action** MGRM Susan A. Stone 3591 Waterchase Way East ✓ Add Jacksonville, FL 32224 Remove Armstrong, Colin MGRM 114 Regents Place ☐ Add Remove Ponte Vedra Beach, FL 32082-3958 MGRM Yanover, Robert 570 Ocean Avenue ☐ Add Juno Beach, FL 33408-1952 Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 26 2010 Signature of a member or authorized representative of a member Susan A. Stone Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00