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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	····
(Cit	y/State/Zip/Phone	· • #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
Amend		

Office Use Only

G. MCLEOD

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EXAMINER



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SECRETARY OF STATE
DIVISION OF CORPORATION

COVER LETTER

TO: Régistration Section Division of Corporations			
SUBJECT: Liberty Bod Walk, 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:			
Raxt N. Shah			
(Name of Person)			
Liberty Bodziak, LLC			
Firm/Company)			
6025 Sun Blud +202			
(Address)			
St-Petersburg TL 33715			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Rout Shah at (727, 866-7999 (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} & \text{(additional copy is enclosed)}\$\$ \$\$ \$60.00 Filing Fee, \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} & \text{(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 DIVISION OF CORPORATION TO ARTICLES OF ORGANIZATION 08 APR 10 PM 12: 13 OF

i aa	ertyBodziak,	110	
		ore on our records	
(A	Liability Company as it now appe Florida Limited Liability Company)	
The Articles of Organization for this Limited Lie		April 23, 2007 and assigned	
Florida document numberL050001(05612		
This amendment is submitted to amend the follo	owing:		
	··· 		
A. If amending name, enter the new name of	the limited liability company h	ere:	
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation	
B. If amending the registered agent and/oregistered agent and/or the new registered off	2	our records, enter the name of the nev	
Name of New Registered Agent:			
	6005 Sur	Blud #202	
New Registered Office Address:	(Enter Florida street address)		
	St Petersburg	, Florida 33715	
	(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 address, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR ≐ Manager

MGRM = Managing Member **Type of Action** Title Address Name Fack Bodziak Punit R. Shah Add Remove Add Remove Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00