

Florida Department of State
Division of Corporations
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JUL 11 2008

To:

Division of Corporations
 Fax Number : (850) 617-6383

EXAMINER

From:

Account Name : ROBERTS, SEWARD & COMPANY PA
 Account Number : I20040000178
 Phone : (813) 225-1040
 Fax Number : (813) 221-3135

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

GRAND OAK ENTERPRISES LLC

Certificate of Status	0
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 TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Grand Oak Enterprises, LLC

(Name of the 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 11/9/2005 and assigned
Florida document number 4080001091108.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3918 Cedar Cay Circle
Valrico, FL 33594

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3918 Cedar Cay Circle
Valrico, FL 33594

B. If amending the 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 here:

Name of New Registered Agent:

Kuebler & Associates, Inc

New Registered Office Address:

3918 Cedar Cay Circle

(Enter Florida street address)

Valrico

(City)

Florida

33594

(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.

[Signature]
(If Changing Registered Agent, Signature of New Registered Agent)

Page 1 of 2

4080001701073

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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:

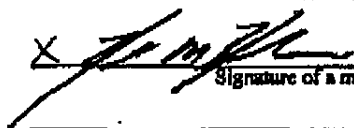
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgr	John Remussen	201 W Franklin St Suite 2000 Tampa, FL 33602	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Mgr	Keebler & Associates Inc	2918 Cedar Bay Circle Valrico, FL 33594	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____

X 

Signature of a member or authorized representative of a member

Typed or printed name of signer

Page 2 of 2

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