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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT:	OLD BAILE	ted Liability Company)	
	(Name of Limi	ted Liability Company)	
	mendment and fee(s) are sub-	<u>-</u>	
	JUAN CAR	LOS LONDONO (Name of Person)	
		(Name of Person)	· <u>················</u>
		EY L.L.C. (Firm/Company)	
	10,000	SW 52 PL AVE.	#55-J
	GAINESV:	SW 52 nd AVE. (Address) [18, FL 32608]	₹
		(City/State and Zip Code)	
	cerning this matter, please ca	355 - 245	
JUAN CARLO	os Londons	at (619) 820 ~ 1	414
(Name of	Person)	(Area Code & Daytime T	elephone 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, Certificate of Status & 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

OLD	BAILEY , l	L.L.	<u>.</u>		
(Name of the Limited L	ability Company as it of prida Limited Liability	now appear Company)	s on our records.)	
The Articles of Organization for this Limited Liab Florida document numberLO5000100		led on	11/10/20	205 and as	signed
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of th	e limited liability cor	mpany her	<u>e</u> :		
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liab	oility Compa	ny," the designation	on "LLC" or the	abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		dress on o	our records, <u>ent</u>	er the name	of the new
Name of New Registered Agent:	JUAN CA	ARLOS	LONDONO	4 55 - J	
	10,000 SW 52 Ne., #55-J (Enter Florida street address)				
	GAINES VILL	LE	, Florida	32601	}
	(City))		(Zip Co	de)
New Registered Agent's Signature, if changing Reg	istered Agent:				
I hereby accept the appointment as registered at the provisions of all statutes relative to the prop accept the obligations of my position as registe being filed to merely reflect a change in the reg company has been notified in writing of this cha	per and complete per red agent as provide sistered office addres ange.	rformance ed for in Ch ss, I hereby	of my duties, an hapter 608, F.S. confirm that th	d I am familia Or, if this doc e limited liabil	r with and ument is lity
	(If Changing Re	egistered Ago	ent, Signature of Ne	Registered Ag	EUT.)
•		1		18 ARY SSE	
	Page 1 of 2		-	PF S	П

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 **Type of Action Title** Name **Address** SAMMY D. BAILEY RIP HALL POAD MGRM ☐ Add **Æ** Remove MGRM OLD BAILEY HOLDING, LLC 10,000 SW 52 ☐ Remove □ Add ☐ Remove ☐ Add □ Remove ☐ Add □ Remove □ Add □ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 MAKCH Dated signature of a member or authorized representative of a member JUAN LONDONO CARLOS

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee