L06000010978

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09/29/08--01051--020 **25.00

DIVISION OF CORPORATIONS
ON SEP 29 PM 3: 00

J. BRYAN
SEP 3 0 2008

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Gerald I	_ang Enterprises, L (Name of Lin	LC nited Liability Company)	+
The enclosed Articles of A	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspon	ndence concerning this matter	r to the following:	
	Gerald Lang	(Name of Person)	
	Gerald Lang Enterprises	s, LLC	8
		(Firm/Company)	4.78 6.18 6.18 6.18 6.18 6.18 6.18 6.18 6.1
	PO Box 163		29
		(Address)	PA
	Crestview, FL 32536	(City/State and Zip Code)	OB SEP 29 PH 3: 00
For further information co	oncerning this matter, please o	call:	
Gerald Lang		at (<u>850</u>) 305-9695	
(Name o	f Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the	e 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

TO:

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

ON SEP 29 PH 3: 00

Gerald Lang Enterprises, LLC		· ===
(Name of the Limited Liability Com	npany as it now appears on our records.) ed Liability Company)	— 00 Feet
(A Florida Ellinic	Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on 01/27/2006	and assigned
Florida document number L06000010978		_
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and end with the words "L	.imited Liability Company," the designation "L	LC" or the abbreviation
"L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS		
Enter new mailing address, if applicable:	PO Box 163	
(Mailing address MAY BE A POST OFFICE BOX)	Crestview, FL 32536	
B. If amending the registered agent and/or registered	office address on our records, enter the	ie name of the new
registered agent and/or the new registered office address l	here:	
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street ada	ress)
	, Florida	
		(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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MOKM - I	danaging Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
			Add Remove
			— 5
			- n
			Add Remove
D. If amend	ding any other information, ente	r change(s) here: (Attach additional sheets, if nece	
_			SECRÉTAR DIVISION OF C
			EO Y OF STATE ORPORATION PM 3: 00
Dated Augus	(Geral A.	2008 January member or authorized representative of a member	SNC
	Gerald Lang		
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00