

L010000011010

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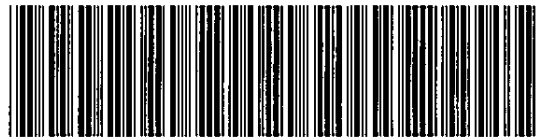
Special Instructions to Filing Officer:

**L. SELLERS**

JUL - 8 2009

**EXAMINER**

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09 JUL -3 AM 8:12

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**LAW OFFICES  
SCRUGGS & CARMICHAEL, P.A.**

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DOWNTOWN OFFICE:  
ONE S.E. FIRST AVENUE 32601  
POST OFFICE BOX 23109 32602  
GAINESVILLE, FLORIDA

TELEPHONE (352) 376-5242  
FAX (352) 375-0690

**WEST OFFICE - METROCORP CENTER:**  
4041 N.W. 37TH PLACE, SUITE B  
GAINESVILLE, FLORIDA 32606

TELEPHONE (352) 416-3477  
FAX (352) 416-3528

□ REPLY TO DOWNTOWN OFFICE  
☑ REPLY TO WEST OFFICE

June 29, 2009

SIGSBEE L. SCRUGGS  
1898-1983  
PARKS M. CARMICHAEL  
1909-1994  
WILLIAM D. PRIDGON  
1933-1980  
MICHELLE VAUGHNS  
1946-1982  
WILLIAM N. LONG  
1920-2003

RETIRED

RAY D. HELPING  
WILLIAM C. ANDREWS  
JOHN F. ROSCOW, III  
MITZI COCKRELL AUSTIN

Via USPS First Class Mail

Department of State  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: DBR Holdings, LLC, Document Number L06000011010 - Amendment

Dear Sir or Madam:

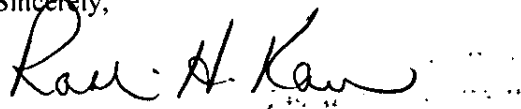
In connection with the above-referenced LLC, please find enclosed the executed request of Articles of Amendment to Article of Organization for DBR Holdings, LLC, together with our trust account check in the sum of \$25.00, payable to the Department of State for the filing fee.

Once this amendment is processed please return the letter of acknowledgment, to my attention, in the enclosed envelope at your earliest convenience.

If any additional information is needed, please feel free to contact me at 352-416-3497. Thank you for your assistance in this matter.

With my warmest regards, I remain

Sincerely,



Robbin H. Karr  
Paralegal to Philip A. DeLaney

:rhk  
Enclosure

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: DBR HOLDINGS, LLC, Document Number L06000011010**  
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:

**ROBBIN H. KARR**

Name of Person

**SCRUGGS & CARMICHAEL, P.A.**

Firm/Company

**4041-B NW 37TH PLACE**

Address

**GAINESVILLE, FL 32606**

City/State and Zip Code

**KARR@SCRUGGS-CARMICHAEL.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ROBBIN H. KARR**

Name of Person

at ( **352** )

**416-3497**

Area Code & Daytime Telephone 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**

DBR HOLDINGS, LLC, Document Number L06000011010

(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 01/31/2006 and assigned Florida document number L06000011010.

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)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida

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**

FILED  
09 JUL -3 AM 8:00  
TALLAHASSEE FL 32301  
SECRETARY OF STATE

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>
MGRM	RANDY BEDSAUL	4041 NW 37TH PLACE SUITE B GAINESVILLE, FL 32606	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	BELLE WESSENDORF	4041 NW 37TH PLACE SUITE B GAINESVILLE, FL 32606	<input type="checkbox"/> Add <input checked="" 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.)

PLEASE UPDATE PHILIP A. DELANEY AS SOLE MANAGING MEMBER

Dated

JUNE 29

2009

Signature of a member or authorized representative of a member

PHILIP A. DELANEY

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JUL -3 AM 8:12

FILED