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To:

Division of Corporations

Fax Number

: (850)617~6383

From:

Account Name : CATHY BOYD

Account Number : I20030000147 Phone : (863)419-1919

Fax Number : (863)419-1920

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CHRISTINA D BOONE LLC

RECEIVED MUG-5 PH 12: 42 SHEWAY OF STATE MASSEE, FLORIDA

Filing Menu Corporate Filing Menu

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T. CLINE

AUG - 6 2008

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	CLES OF AMENDMENT TO	236-0489
ARTIC	LES OF ORGANIZATION OF	236
Christina (Name of the Limited Li (A F)	D Boone LLC ability Company as it now appears on our roorda Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number 4060000///	ility Company were filed on	and assigned
This amendment is submitted to amend the follow	•	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Company," the de	esignation "LLC" of the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET.	ADDRESS)	TO CO
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	DX)	
B. If amending the registered agent and/or registered agent and/or the new registered office		ds, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florid	da 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)

GR = Man GRM = M	ager anaging Member		
<u>ție</u>	Name	Address	Type of Action
1 <u>6RM</u>	Richard W Roberson Jr	4984 Lake Lawry Rd Heiner City Fr 3084	Add Remove
		·	Add Remove
	,		Add Remove
			Add Remove -5
f amendi	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.	
 d	7/29 . 200 6 Christin D.	8	
B	Christina D Typed or	seemotized tehtesettsette of a member	

. Page 2 of 2

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