L06000014376

(Re	equestor's Name)	
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LONDON L. BATES LAW, P.A.

September 22, 2014

State of Florida Division of Corporations Registration Section P. O. Box 6327 Tallahassee, FL 32314

Re: Grace & Truth, LLC

File Number L06000014376

Dear Sir/Madam:

Enclosed for filing, please find Articles of Amendment of Grace & Truth, LLC.

I have enclosed a check payable to the Division of Corporations in the amount of \$25.00.

Please file-stamp the enclosed copy of the Articles of Amendment and return them to me in the enclosed self-addressed, stamped envelope I have provided for your convenience.

Thank you for your attention to the matter set forth herein. Should you have any questions, please do not hesitate to contact me.

Very truly yours,

London L. Bates

LLB:cak Enclosures SASE

Attorney-at-Law • Certified Public Accountant

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Grace	e & Truth, LLC		
	Name of Limi	ted Liability Company	
	Amendment and fee(s) are submodence concerning this matter	-	
	London L. B	ates, Esquire	
		Name of Person	-1.
	London L. B	ates Law, P.A.	ALSO A
	-	Firm/Company	1
	P. O. Box 12	213	The Grant
		Address	그는 다. 글로 후
	Dunedin, FL	34697	<u> </u>
	london@londonb	City/State and Zip Code ateslaw.com o be used for future annual report notifi	ication)
. For further information c	oncerning this matter, please ca	ıll:	
London L. E	Bates, Esquire	_{at} 727, 734-8	700
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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

Grace & Truth, LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L06000014376</u> .	pany were filed on February 8, 2006 and assigned
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	State P
Enter new principal offices address, if applicable:	10 to 10
Principal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable:	199 Old East Lake Road
Mailing address MAY BE A POST OFFICE BOX)	Tarpon Springs, FL 34689
B. If amending the registered agent and/or registered registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	d office address on our records, enter the name of the here: 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager · uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Actio
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ffective date must be specific,	, cannot be prior to date of receipt or filed date and cannot be more the Florida Department of State)	(optional) than 90 days after
ffective date must be specific, late this document is filed by t	cannot be prior to date of receipt or filed date and cannot be more the Florida Department of State) 2014 Signature of a member or authorized representative of a me	than 90 days after (

Page 3 of 3

Filing Fee: \$25.00