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SECRETARY OF STATE
DIVISION OF CORPORATIONS
OF PH 12: 09

4. SRYAN MAR 2 3 2007

COVER LETTER

TO:

Registration Section

Division o	of Corporations		
SUBJECT:	GA	RY HALE, LLC	
	(Name of	Limited Liability Company)	
The enclosed Articl	tes of Amendment and fee(s) are s	submitted for filing.	
Please return all con	rrespondence concerning this matt	ter to the following:	
	GAI	RY R. HALE	
		(Name of Person)	
	GA	RY HALE, LLC	
		(Firm/Company)	0 0
	3208	8 W. 16TH ST.	NISION OF CORPORATIONS OT HAR 22 PH 12: 10
		(Address)	R 2
	PANAM	A CITY, FL 32401	2 P
	(Cit	ty/State and Zip Code)	ORA HIZ
For further information	tion concerning this matter, please	e call:	AR 22 PH 12: 10
CONN	IE THARPE	at (_850) 785-4412	
_	(Name of Person)	(Area Code & Daytime Telephone Number	•)
Enclosed is a check for	or the following amount:	•	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Scertified Copy (additional copy is enclosed) Certified Copy (additional copy (additional copy)	tus &
Ro D P.	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, 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

GARY HALE, LLC

(Present Name)
(A Florida Limited Liability Company)

			• .				
FIRST:	The Articles of Organizate document number L0600	tion were filed on 02/28	/2006 and a	assigned			
SECOND:	This amendment is submitted to amend the following: ARTICLE I - Name: The name of the Limited Liability Company should be changed						
	to TOP WATER MARINE, LLC, effective immediately.						
	ARTICLE IV - Manager	(s) or Managing Membe	ers(s): The name of LAWRE	ENCE N. STUECK,			
of 3208 W. 16th St., Panama City, Fl 32401, should be deleted as a Managing Member and the name of JAMES D. WHITE, OF PO Box 16754, Panama City							
			,				
				•			
Dated MA	ARCH 21			07 M	DIAIG		
		lea Male		MAR 22 PM 12:	FILE FARY OF CO		
	- Sig h atu	re of a member or authorize	ed representative of a member	7.5	RATIO		
		GARY R.	• • • • • • • • • • • • • • • • • • • •) X		
		Typed or printed na	ame of signee				

Filing Fee: \$25.00