LD6000043734

(R€	equestor's Name)		
(Ad	ldress)		
		•	
(Address)			
(Cit	ty/State/Zip/Phone	· #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
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C. LEWIS
FEB 1 0 2011
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2011

RUFUS W. TINGLE CAJUN INVESTMENTS LLC PO BOX 1197 MADISONVILLE, LA 70447

SUBJECT: CAJUN INVESTMENTS, LLC

Ref. Number: L06000043734

We have received your document for CAJUN INVESTMENTS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any further questions concerning your document, please call (850) 245-6047.

Letter Number: 111A00002028

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

·	COVER LETTER
то:	Registration Section Division of Corporations
SUBJE	CT: CAJUN INVESTMENTS LLC Name of Limited Liability Company
The end	losed Articles of Amendment and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Purus W TNGIE Name of Person
	CAJUN INVESTMENTS LLC Firm/Company
	P.o. Bax 1/97 Address
	MADIS ONVILLE City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
Ru	Fus w. Tingle at (985) 966-082-0 Name of Person Area Code & Daytime Telephone Number
Enclose	d is a check for the following amount:
\ \$25.	00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)}} \text{\$\frac{1}{2}\$\$\$\$ \$60.00 Filing Fee, \text{Certified of Status & Certified Copy (additional copy is enclosed)}} \text{\$\frac{1}{2}\$}\$\$

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

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ARTICLÉS OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

2011 FEB -9 AM 10: 45

•	U	r		and the section
CATTURE	Talves	TMENTS	SECRETA	RY.OF STATE SSEE: FLORIDA
(Name of the Limited)	Liability Compa Florida Limited L	ny as it now appears or Liability Company)	our records.)	
The Articles of Organization for this Limited Lia		were filed on,	.27.06	and assigned
Florida document number	3734			
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Company,	'the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applica	ıble:	3593 W	AVERLY	CIRCLE
(Principal office address MUST BE A STREET	TADDRESS)	DESTIN	FLORI	4 32541
Enter new mailing address, if applicable:		P.O. Bo	× 1/97	
(Mailing address MAY BE A POST OFFICE BOX)		P.O. BO MADISON	VILLE	LA 70447
B. If amending the registered agent and/o			records, enter th	e name of the new
registered agent and/or the new registered off		_		
Name of New Registered Agent:	RUF	us W 1		
New Registered Office Address:	3593		/ C/RC/ Florida street addre	
	Ž	ESTIN	, Florida	32541
		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.

f Changing Registered Agent, Signature of New Registered Agen

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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	KEVIN TINGLE	NICEVILLE FLORIDE	Add Remove
MGL	CRYSTAL TINGLE	44 90 PARKWOOD SQ. NICEVILLE FLORIDA 325 TR	Add Remove
			Add Remove
	·		Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter char	nge(s) here: (Attach additional sheets, if necessar	y.)
			2011 FEB -9 AM
Dated	Rufus W.	per or authorized representative of a member	9 MID: 45 SSEEFFEORIDA
	RyFus W.	TIN ELE ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00

DONATION INTER VIVOS

UNITED STATES OF AMERICA

FILED

· BY: KEVIN D. TINGLE and

CRYSTAL M. TINGLE

STATE OF FLORIDA 2011 FEB -9 AM 10; 46

TO:

RUFUS W. TINGLE and

KIM C. TINGLE

COUNTY/PARISH OF

F A CO. THAT A SSEE: FLORID

BE IT KNOWN, before me, Notary Public, that on the <u>27</u> day of December, 2010, before me, the undersigned Notary Public, duly commissioned and qualified, in and for the state aforesaid, therein residing, and in the presence of the competent witnesses hereinafter named and undersigned:

PERSONALLY CAME AND APPEARED:

KEVIN D. TINGLE and CRYSTAL M. TINGLE, both persons of the full age of majority, who declared unto me, Notary, that they are currently living and residing together in the State of Florida; their mailing address being 4490 Parkwood Square, Niceville, FL 32578;

who declares that they do, by these presents, irrevocably donate inter vivos, give, grant, transfer and set over, with all legal warranties and with full substitution and subrogation in and to all rights and actions of warranty which said donor has or may have against all preceding owners and vendors, and deliver unto

RUFUS W. TINGLE and KIM C. TINGLE, both persons of the full age of majority, who declared unto me, Notary, that they are currently living and residing together; their mailing address being 205 Bordeaux Court, Madisonville, LA 70447;

all of their undivided interest, right, and title in and to and known as CAJUN INVESTMENTS, LLC.

To have and to hold the above described property unto DONEE, his heirs, successors and assigns

FILED

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SECRETARY OF STATE. TALEAHASSEE: FLORIDA

THUS DONE AND PASSED at my office in Mandaullo, Je

presence of the undersigned competent witnesses, who hereunto sign their names with said appearers and me, Notary, after reading of the whole.

-WITNESSES:

ACCEPTED BY DONEE:

NOTARY PUBLIC

MICHAEL TISTONE Ban# 12505

STONE TITLE INSURANCE OF LA, LLC 1510 W. CAUSEWAY APPROACH, SUITE D MANDEVILLE, LA 70471 (985) 624-8045