

LO60000 46165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐

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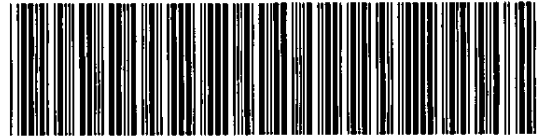
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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NOV 09 2015
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Resources LLC

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:

Wayne Leiser

Name of Person

Resources LLC

Firm/Company

9040 Town Center Parkway

Address

Lakewood Ranch FL 34202

City/State and Zip Code

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

For further information concerning this matter, please call:

Wayne Leiser

941 923-6280
at ()

Name of Person

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**

Resources LLC

(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 05/04/2006 and assigned Florida document number L06000046165.

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 contain 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)

935 N Beneva Rd Ste 609-31
Sarasota, FL 34232

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

935 N. Beneva Rd. Ste 609-31
Sarasota FL 34232

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

City, **Florida**

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mr.	Wayne Leiser	935 N. Beneva Rd. Ste 609-31	<input type="checkbox"/> Add
		Sarasota FL 34232	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mrs.	Lessie Crosson	935 N. Beneva Rd. Ste 609-31	<input type="checkbox"/> Add
		Sarasota FL 34232	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Resources Explorations LLC	100 Houston Square	<input type="checkbox"/> Add
		Canonsburg PA 15317	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGMBR	Stuart Turner	935 N. Beneva Rd. Ste. 609-31	<input type="checkbox"/> Add
		Sarasota FL 34232	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGMBR	Randy Crosson	935 N. Beneva Rd. Ste. 609-31	<input type="checkbox"/> Add
		Sarasota FL 34232	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2015 MAR - 9 PM 4:05
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA