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S. HAWKES
DEC - 8 2009
EXAMINER

COVER LETTER

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TO:	Registration Division of C						
SUBII	SUBJECT: Advanced Wildlife Trappers, LLC						
			ited Liability Company				
The en	closed Articles	of Amendment and fee(s) are su	bmitted for filing.				
Please	return all corres	spondence concerning this matte	r to the following:				
			Jose G. Perez				
			Name of Person				
Advanced W			iced Wildlife Trappers,	LLC			
		•	Firm/Company				
4550 Sailbreeze Ct.							
			Address				
			Orlando, FL 32810				
		4	City/State and Zip Code				
		F-mail address:	Inoei1@cfl.rr.com (to be used for future annual repo	ort notification)			
For fur	ther information	n concerning this matter, please					
		Jose G. Perez	at (_407_)	575-0999			
	Name	e of Person	Area Code &	Daytime Telephone Number			
Enclos	ed is a check fo	r the following amount:					
₹ 25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
		ILING ADDRESS: stration Section	STREET/C Registration	COURIER ADDRESS:			
Division of Corporations P.O. Box 6327			Corporations				

Tallahassee, FL 32314

2661 Executive Center Circle
. Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liabi	I VVIIOIIIE Trappers, I	LC		
(A Florid	lity Company as it now appea la Limited Liability Company)	in on our records,		
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on	June 22, 2006	and assigned SECRETARY OF STA	
This amendment is submitted to amend the following			がいる。	
A. If amending name, enter the new name of the li			70 6	
•	ed Wildlife Trappers, LL	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
The new name must be distinguishable and end with the v"L.L.C."	words "Limited Liability Comp	any," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD	DRESS)			
Enter now moiling address if applicables				
Enter new mailing address, if applicable:		,		
(Mailing address MAY BE A POST OFFICE BOX)	 			
B. If amending the registered agent and/or reg registered agent and/or the new registered office a		our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	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 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or <u>Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = I	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ D
			☐ Add ☐ Remove
			(Tall Damason 1
			TAME STATE OF THE
***************************************			Add Remove
			Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional she	eets, if necessary.)
_			
Dated	December 4	2009	
	Signature of a	member or authorized representative of a m Jose G. Perez	nember
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00