(Re	questor's Name)		
(IVC	gassions manner		
- (Ad	dress)		
(/ 104	uicos)	•	
(Ad	dress)		
(/ tu	aicas)		
(Cit	y/State/Zip/Phone	- #A	
(0.0	.y/Otato/21p// 11011	<i>,</i>	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
!			
]			

Office Use Only

G. MCLEOD SEP 26 2008 EXAMINER



500136190985

09/25/08--01005--006 \*\*25.00

## COVER LETTER.

TO: Registration S Division of Co			•
SUBJECT:	Tri Rur (Name of Limi	ning LLC ted Liability Company)	
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	£	Rebecca Jones (Name of Person)	
		Running UC (Firm/Company)	
	<u> </u>	Box 953007 (Address)	
	Lalle	City/State and Zip Code)	95
For further information	concerning this matter, please ca	ail:	
Rebecca (Name	Jones e of Person)	at (407) 687-317 (Area Code & Daytime T	Selephone 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)	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

(Name of the Limited Liability Company	as it now annears on our records.)			
(A Florida Limited Li	ability Company)			
The Articles of Organization for this Limited Liability Company v	were filed on	_ and ass	signed	
Florida document number <u>L060000 6 9915</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company here:			
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Company," the designation "LLC	" or the	abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		0	<u> </u>	
		SB	335	
		TP	三元	
Enter new mailing address, if applicable:		25		
(Mailing address MAY BE A POST OFFICE BOX)		P	20.E	
Municipal Maria De Maria Con Control Dong		<u></u>	<u> </u>	
		- 29	mond in a	
B. If amending the registered agent and/or registered off	ice address on our records, enter the	_	⊆' of the nev	
registered agent and/or the new registered office address here				
Name of New Registered Agent:				
New Registered Office Address:				
	(Enter Florida street address)			
	, Florida		<del></del>	
	(City)	(Zip Co	de)	

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 Changing Registered Agent, Signature of New Registered Agent)

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 = Manager

MGRM = Managing Member <u>Address</u> <u>Title</u> <u>Name</u> **Type of Action** Add 🗂 Remove \_ Add Remove **□** Add Remove ☐ Add 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 22 2008 Signature of a member or authorized representative of a member Rebecca Junes
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00