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A. LUNT
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EXAMINER

## **COVER LETTER**

TO: Registration Section

Division of Corporations		
SUBJECT: It's what we do L.C.		
(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:		
Pauline Bangert (Name of Person)		
1t's what we do LLC (Firm/Company)		
3537 Maple Ridge Loop (Address)		
LISSIMMER FL 3474/ ARE TO City/State and Zip Code)		
For further information concerning this matter, please call:    Auline   Space   at (407, 340-7/3 = 1)     (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  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

It's what	we do Lilli	
(Name of the Limited Li (A F	ability Company as it now appears on our orda Limited Liability Company)	records.)
The Articles of Organization for this Limited Liab	ility Company were filed on An 3	- 4
Florida document number <u>OOSAODO</u>	462	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and end with to "L.L.C."		2008 FE SECRE
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our recor	rds, enter the name of the new
registered agent and/or the new registered offic	e address nere:	Y OF ST
Name of New Registered Agent:		
New Registered Office Address:		_
	(Enter Florida street address)	
	(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 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

**Title Address Type of Action** Name MGRM Pauline BANGET Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated \_ ignature of a member or authorized representative of a member SANGER T Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00