#206000080624

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2004.110.110.110.1)
0.07.40
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·





800251249288

09/06/13--01012--022 **50.00

FILED

13 SEP - 6 PH. 1: 36

SEUNCIÁN OF STATE

SEUNCIÁN OF STATE

K.SALY EXAMINER SEP 10 2013

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

13 SEP - 6 PM 1: 36

SECRETARY OF STATE

FALLAHASSEE TO

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 and assigned Florida document number 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 end with 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

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.

City

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>Title</u> **Name Address** Type of Action Remove Remove

D. • If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	8/23. 13 ()WC.
	Signature of a member of authorized representative of a member of DDD LEGN. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00