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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORID

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D. BRUCE

SEP 18 2012

EXAMINER

COVER LETTER

234

| TO: Registration S Division of Co | Section orporations | | | | |
|-----------------------------------|--|---|--|--------------------------|---------------------|
| SUBJECT: | | Pernell, LLC | | | |
| • | Name of Lim | ited Liability Company | | | |
| The enclosed Articles o | f Amendment and fee(s) are su | bmitted for filing. | | | |
| Please return all corresp | oondence concerning this matte | r to the following: | | | |
| | | William E. Pernell | | | |
| | | Name of Person | | i. | |
| | | R.A. Pernell, LLC | · | | |
| | | Firm/Company | | | |
| | 2 | 2113 Barracuda Court | | | |
| | , | Address | · · · · · · · · · · · · · · · · · · · | | |
| | ŀ | Holiday, Florida 34691 | | | |
| | | City/State and Zip Code | | | |
| , | E-mail address: | nillpernell@gmail.com (to be used for future annual report notificat | ion) | 12 SECTALL | |
| For further information | concerning this matter, please | | | SEP 17 CRETARY | APPIK AN FILI |
| | liam E. Pernell | | 23-0622 | SSEE, FLD | 505 |
| Name | of Person | Area Code & Daytime To | elephone Number | II: 37 SIME LERIDA | ₹7 |
| Enclosed is a check for | the following amount: | | | an " | |
| ✓ \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Certificate of Certified Co | f Status & | |

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

| | R.A. Pernell, LLC | · | · |
|--|---|------------------------------|--|
| (Name of the Limited L (A F | iability Company as it now ap lorida Limited Liability Compa | ny) | |
| The Articles of Organization for this Limited Liab | | 08/16/2008 | and assigned |
| Fiorida document number | | | |
| This amendment is submitted to amend the follow | ving: | | |
| A. If amending name, enter the new name of t | he limited liability company | <u>here</u> : | |
| The new name must be distinguishable and end with "L.L.C." | · | ompany," the designation " | LLC" or the abbreviation |
| Enter new principal offices address, if applicab | | | |
| (Principal office address MUST BE A STREET | ADDRESS) | | |
| | | | |
| | | • | TAS FI |
| Enter new mailing address, if applicable: | | | THE SERVICE SE |
| (Mailing address MAY BE A POST OFFICE B | <u></u> | | |
| % . | ·! | | <u> </u> |
| | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office | | on our records, <u>enter</u> | the name of the new |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | | Enter Florida street ad | dress |
| | , 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 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** <u>Name</u> **Address** Type of Action 2113 Barracuda Court Holiday, Florida 34691 William E. Pernell MGR_ ☑ Add Remove ☐ Remove ☐ Add ☐ Remove \bigcap Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MGR William E. Pernell 10% ownership Dated Sept 13 2012

Page 2 of 2

Filing Fee: \$25.00

Signature of a member of authorized representative of a member

TRIPLE
Typed or printed name of signee