

| (Re                     | equestor's Name)   |           |  |
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| (Cit                    | ty/State/Zip/Phone | e #)      |  |
| PICK-UP                 | ☐ WAIT             | MAIL      |  |
| (Bu                     | siness Entity Nan  | ne)       |  |
| (Document Number)       |                    |           |  |
| Certified Copies        | _ Certificates     | of Status |  |
| Special Instructions to | Filing Officer:    |           |  |
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G. MCLEOD

JUL 2 - 2010

**EXAMIN**:



100182613381

07/01/10--01026--016 \*\*30.00

SLORE JARY OF STATE TALLAHASSEE, FLORIDA

10 JUL -1 PM 1:01

## **COVER LETTER**

| TO: Registration Section Division of Corporations |   |  |   |  |
|---|---|--|---|--|
| SUBJECT:  | FLEGEL FAMIL  | Y ENTERPRISES, LLC   | ,   |  |
| Sobole I.   |   | ited Liability Company   |   |  |
|   | of Amendment and fee(s) are su<br>spondence concerning this matte             | Č  |   |  |
|   |   | WHITNEY CURRY  |   |  |
|   |   | Name of Person   |   |  |
|   | FLEGEL  | FAMILY ENTERPRISES, L  | LC  |  |
|   |   | Firm/Company   |   |  |
|   | 4951 GULF SHO   | RE BLVD NORTH, PENTH   | OUSE 201  |  |
|   |   | Address  |   |  |
|   |   | NAPLES, FL 34103   |   |  |
|   | wo  | City/State and Zip Code  |   |  |
|   | E-mail address: (   | urry@huckgroupinc.com (to be used for future annual report notifi                                    | cation)   |  |
| For further information                           | n concerning this matter, please  | call:  |   |  |
| WH  | HITNEY CURRY  | at ( 239 )   | 692-8470  |  |
| Nam   | e of Person   | Area Code & Daytim   | e Telephone Number  |  |
| Enclosed is a check for                           | r the following amount:   |  |   |  |
| \$25.00 Filing Fee                                | \$30.00 Filing Fee & Certificate of Status                                    | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed                                     | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |
| Regi<br>Divis<br>P.O.                             | LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314 | STREET/COURI<br>Registration Section<br>Division of Corpora<br>Clifton Building<br>2661 Executive Ce | n<br>ations   |  |

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| FLEGEL  | . FAMILY EN                               | NTERPRISES                                | S, LLC                    |                |               |
|---|---|---|---------------------------|----------------|---------------|
| (Name of the Limited  | Liability Compa<br>Florida Limited I      | ny as it now appear<br>Liability Company) | rs on our records.)       |                |               |
| The Articles of Organization for this Limited L   | iability Company                          | were filed on                             | 06/22/2010                | and ass        | signed        |
| Florida document number L0600011  | 7134                                      |   |                           |                |               |
| This amendment is submitted to amend the foll   | owing:                                    |   |                           |                |               |
| A. If amending name, enter the new name o   | f the limited liab                        | ility company her                         | <u>e</u> :                |                |               |
|   | N/A                                       | <b>\</b>                                  |                           |                |               |
| The new name must be distinguishable and end wi "L.L.C."                                  | th the words "Limi                        | ited Liability Compa                      | my," the designation '    | *LLC" or the a | abbreviatio   |
| Enter new principal offices address, if applicable:                                       |   | 4951 GULF SHORE BLVD NORTH                |                           |                |               |
| (Principal office address MUST BE A STREET ADDRESS)                                       |   | PENTHOUSE                                 | E 201                     | <u> </u>       |               |
|   |   | NAPLES, FL                                | 34103                     | <u>ے 55</u>    | ect of letter |
| Enter new mailing address, if applicable:   |   | 4951 GULE 9                               | SHORE BLVD N              |                | or man        |
| (Mailing address MAY BE A POST OFFICE BOX)  |   | PENTHOUSE                                 |                           | <u> </u>       |               |
|   |   | NAPLES, FL                                |                           | - G            | U             |
|   |   | <u>,</u>                                  |                           | <b>3 2</b>     |               |
| B. If amending the registered agent and/<br>registered agent and/or the new registered of |   |   | our records, <u>enter</u> | the name o     | f the nev     |
| Name of New Registered Agent:   | S. LESLIE F                               | FLEGEL                                    |                           |                |               |
| New Registered Office Address:  | 4951 GULF SHORE BLVD NORTH, PENTHOUSE 201 |   |                           |                |               |
|   | Enter Florida street address              |   |                           |                |               |
|   |   | NAPLES                                    | , Florida                 | 34100          | 3             |
|   |   | City                                      |                           | Zip Code       | _ <del></del> |
| New Registered Agent's Signature, if changing l   | 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. Thereby 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>Title</u>  | <u>Name</u>                                  | Address  | Type of Action |  |  |  |  |
|---------------|--|--|----------------|--|--|--|--|
| MGR           | S. LESLIE FLEGEL                             | 4951 GULF SHORE BLVD NORTH<br>PENTHOUSE 201<br>NAPLES, FL 34103                              | Add<br>Remove  |  |  |  |  |
|               | , page 1 1 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |  | Add Remove     |  |  |  |  |
|               |  |  | Add            |  |  |  |  |
| <del></del> . |  |  | Add<br>Remove  |  |  |  |  |
|               |  |  | Add<br>Remove  |  |  |  |  |
|               |  |  | Add<br>Remove  |  |  |  |  |
| D. If an      |  | ange(s) here: (Attach additional sheets, if necessary.) address on the Annual Report. We are |                |  |  |  |  |
|               | correcting the annual report.                | adicas on the Annual Nepolt. We are  | _              |  |  |  |  |
|               |  |  | _              |  |  |  |  |
| Dated         | June 28 ,                                    | 2010   | _              |  |  |  |  |
|               |  | nber or authorized representative of a member  S. Leslie Flegel                              |                |  |  |  |  |
|               | Typed or printed name of signee              |  |                |  |  |  |  |

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Filing Fee: \$25.00