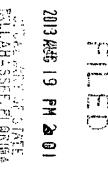
20700008075

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| AUG 22 2013 A. LUNT |
| |

Office Use Only



300250662313



08/13/13--01008--005 **25.00

COVER LETTER

| TO: Registration Sec Division of Corp | | | |
|--|---|--|---|
| SUBJECT: Lime: | cock, LLC. | | |
| | Name of Lim | ited Liability Company | |
| | Amendment and fee(s) are su | 2 | |
| | | | |
| | Janice Kolar | | |
| | | Name of Person | 2013 20 |
| | Brooks Tropical | s Holding, Inc. | |
| | | Firm/Company | |
| | • | | #**** |
| | P.O. Box 900160 | | |
| | | Address | |
| | Homestead, FL | 33090-0160 | <u> </u> |
| | | City/State and Zip Code | |
| | janice@brookstro | | |
| | E-mail address: | (to be used for future annual report notification | on) |
| For further information co | ncerning this matter, please | call: | |
| Janice Kolar | | at 305) 247-3544, e | xt. 7444 |
| Name of | Person | Area Code & Daytime Tel | ephone Number |
| Enclosed is a check for the | e following amount: | | |
| ☎ \$25.00 Filing Fee | □\$30.00 Filing Fee & Certificate of Status | □\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □\$60.00 Filing Fee, 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

| Limerock, LLC. | - | | | _ | |
|---|--|------------------------------|------------------|----------------|--------------|
| (<u>Name of the Limited Liability</u> (A Florida L | Company as it now apprinted Liability Compan | oears on our records.) y) | | | |
| The Articles of Organization for this Limited Liability Co | ompany were filed on _ | 01/19/2007 | and | assigned | i |
| Florida document number <u>L07000008075</u> | _ · | | | | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limit | ted liability company | <u>here</u> : | | | |
| The new name must be distinguishable and end with the word "L.L.C." | ds "Limited Liability Con | npany," the designatio | n "LLC" or th | he abbre | viation |
| Enter new principal offices address, if applicable: | | | | | |
| (Principal office address MUST BE A STREET ADDR | ESS) | | <u> </u> | 2013 | |
| | | | <u> </u> | 350 | _ |
| | | | 5. 2. 1 20 = | <i>3</i> 23 | 1100000 |
| Enter new mailing address, if applicable: | | | 50,203 [1715] | 9 | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | 7,2% | - K | [] |
| | | | | M ₂ | |
| | | | 52 jr : | <u>e</u> | |
| B. If amending the registered agent and/or registered agent and/or the new registered office addr | | n our records, <u>ent</u> | er the nam | e of the | e new |
| Name of New Registered Agent: | | | | - | |
| New Registered Office Address: | | | | | |
| | | Enter Florida street | address | | |
| | | , Florida | | | |
| | City | | Zip C | ode | - — |

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> Type of Action <u>Address</u> Remove Remove **(E)** Remove Add Remove

| D. If an | nemding any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|----------|--|
| • | Article IV - Management |
| | |
| | The company shall be a Member managed company and the management of |
| | the LLC. shall be by the sole Member, Brooks Tropicals Holding, Inc., |
| | a Florida corporation. |
| Dated _ | July 24, 3013. |
| | Signature of a member or authorized representative of a member |
| | Janice Kolar Typed or printed name of signee |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00

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