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COVER LETTER

TO: Registration Se Division of Cor						
SUBJECT: ZINNIA - TANGO, LLC						
(Name of Limited Liability Company)						
	•					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	James R. Powell					
(Name of Person)						
	Powell - Link, L.L.C.					
(Firm/Company)						
	3352 Perimeter Rd.					
		(Address)				
	Palm City, FL 34990		•			
		(City/State and Zip Code)				
For further information concerning this matter, please call:						
James R. Powell		at (772) 283-2292				
(Name	of Person)	(Area Code & Daytime	Telephone Number)			
Enclosed is a check for the	he 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)			
MAIL	ING ADDRESS:	STREET/COURIE	R ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION . OF

ZINNIA - TANGO, LLC	•			
(Name of the Limited I	Liability Company as it now appears on our record Florida Limited Liability Company)	<u>(s.</u>)		
	- versus annoted and annoted and annoted and annoted annoted and annoted annoted annoted and annoted annoted and annoted annot			
The Articles of Organization for this Limited Lia	ability Company were filed on 2/12/07	and assigned		
Florida document number L07000016210		80 SVI		
		SECR		
This amendment is submitted to amend the follow	wing.	JUN 27		
		음속도		
A. If amending name, enter the new name of the limited liability company here:				
		SIAI)RAT 2: 1		
The new name must be distinguishable and end with	the words "Limited Liability Company," the designa	tion "LLC" or the appreviation		
"L.L.C."		W/		
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	(ADDRESS)			
		· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:				
• • • • • • • • • • • • • • • • • • • •				
(Mailing address MAY BE A POST OFFICE B				
R If amending the registered agent and/o	r registered office address on our records, e	nton the name of the new		
registered agent and/or the new registered off		mer the name of the nev		
-		•		
Name of New Registered Agent:				
•				
New Registered Office Address:	CD + DI + I	. 17		
	(Enter Florida street address)			
	, Flori	da		
	(Citv)	(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 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>	<u>Address</u>	Type of Action
MGR	Robert E. Powell	19176 SE Old Trail Drive West Jupiter, FL 33478	
MGR	Charles W. Link, Jr.	3821 SW Ruark Street Port St. Lucie, FL 34953	_
MGR	Antonia P. Link	3821 SW Ruark Street Port St. Lucie, FL 34953	_
MGR	Dianne K. Powell	3352 Perimeter Rd. Palm City, FL 34990	
			Add Remove
			C Damaria
D. If am	ending any other information, enter chang	ge(s) here: (Attach additional sheets, if nece	ssary.)
	The four added Managers bring the total nu Any and all business transactions, including		······································
	signature of three Managers providing at lea	ast four of the Managers are alive and	
	competent. Only two Manager's signatures	shall be required for all business transaction	ns,
	including the transfer of real property, if few	rer than four Managers are alive and compe	tent.
Dated Ju	(): Pa	er or authorized representative of a member	
	James R. Powell	d or printed name of signee	
	Typed	i or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00