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FILED 10 JUL 12 AM 9: 45 SECRETARY OF STATE SECRETARY OF STATE

J. BRYAN

JUL 13 2010

EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	Corporations	,	;	
SUBJECT:	CHE	ER-ANCY LLC		
		mited Liability Company	1	
The enclosed Articles	of Amendment and fee(s) are s	submitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
•			\$	
	•	ROBERT D FRAZER		
•		Name of Person		•
•		Firm/Company		
	209	0 S NOVA RD SUITE A	A05	TALE TO
		Address		JUL 12 AH 9: 45 LLAHASSEE, FLORII
· · · · · · · · · · · · · · · · · · ·	DA`	YTONA BEACH, FL. 32	119	JUL 12 AF
		City/State and Zip Code		THE E
	E-mail address	robertfrazer@cfl.rr.com : (to be used for future annual repo	et notification)	9: 45 STATE LORID
For further information	on concerning this matter, please		it normeations.	AGE ST
Torrardio miornacio	on concerning this matter, prease	o can.		
	BERT D FRAZER	at (386)	767-1242	
Nan	ne of Person	Area Code & I	Daytime Telephone Numbe	1
Padar dia salah d				
	or the following amount:	Fig. oo pite. D. o	- Inco on m	
\$25,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & - Certified Copy (additional copy is en	closed) Certification	ate of Status &
Reg Div P.O	ision of Corporations Box 6327 Bhassee, FL 32314	Registration Division of C Clifton Build	Corporations ding ive Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ER-ANCY LLC	-	
(Name of the Limited Liabili	ty Company as it now appears on o Limited Liability Company)	ur records.)	
(A Fiorida	company)		
The Articles of Organization for this Limited Liability	Company were filed onMAR	CH 02, 2007	and assigned
Florida document number L07000023752		•	
	_	i .	
This amendment is submitted to amend the following:		i •	
A. If amending name, enter the new name of the lin	nited liability company here:		_
		· · · · · · · · · · · · · · · · · · ·	Secondary of the second
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," th	ne designation "	LEGY or the abbreviation
Enter new principal offices address, if applicable:	1337 COCONUT I	PALM CIR	SHO BE
(Principal office address MUST BE A STREET ADD	RESS) PORT ORANGE,	FL: 32128	5. 5.
		;	REG IS
			**
Enter new mailing address, if applicable:	1337 COCONUT	PALM CIR	
(Mailing address MAY BE A POST OFFICE BOX)	PORT ORANGE,	FL:.32128	
		t .	
			
B. If amending the registered agent and/or regis		cords, enter	the name of the new
registered agent and/or the new registered office ad	<u>lress here</u> :		
		<u>;</u>	
Name of New Registered Agent: NAM	ICY MAGLIOCCHETTI		
New Registered Office Address: 133	7 COCONUT PALM CIR	•	
	Enter Flo	orida street add	lress -
	PORT ORANGE	, Florida	32128
•	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.

Changing Registered Agent, Signature of New Registered Age

Page 1 of 2

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Type of Action** <u>Address</u> <u>Title</u> <u>Name</u> CHERYL L MCINTIRE 704 PELICAN BAY DR ☐ Add . Remove DAYTONA BEACH, FL 32119 **MGRM** NANCY MAGLICCHETT 1337 COCONUT PALM CIR Add √ Remove PORT ORANGE, FL 32128 MGR. NANCY MAGLICCHETTI 1337 COCONUT PALM CIR ✓ Add PORT ORANGE, FL. 32128 Remove Add Remove ∏Add Remove-Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessar Dated ized representative of a member NANCY MAGLIOCCHETTI Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00