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Special Instructions to	Filing Officer:				
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TÄLLAHASSEE, FLORIDA

2008 NOV -4 AM II: DI

C. LEWIS

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EXAMINER

COVER LETTER ·

TO: Registration Se Division of Con			
SUBJECT: Chanm	an, LLC		
	(Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Krystal G. Watson		
,		(Name of Person)	-
	Chanman, LLC		
		(Firm/Company)	
	10250 Normandy Blvd, S	Ste 702	
		(Address)	
	Jacksonville, FL 32221		
		(City/State and Zip Code)	
For further information c	concerning this matter, please c	all:	
Krystal G. Watson	at (904) 483-3300		
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	he following amount:	e e	
☑ \$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

FILED

2000 NOV -4 AM 11: 06

SEUNETAR LUI STATE TALLAHASSEE, FLORIDA

Chanman, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

,		, ,	
The Articles of Organization for this Limited L	6/2007 and assigned		
Florida document number 1.07000040309			
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here	:
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Compar	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		Chanman, LLC	
(Principal office address MUST BE A STREET ADDRESS)		1117 Chandler Oaks Dr	
		Jacksonville, FL	32221
Enter new mailing address, if applicable:		Chanman, LLC	
(Mailing address MAY BE A POST OFFICE BOX)		1117 Chandler Oaks Dr	
		Jacksonville, FL	32221
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	_		ur records, enter the name of the nev
New Registered Office Address:	1117 Chandle	er Oaks Dr	
		(En	ter Florida street address)
	Jacksonville, I	FL 32221	, Florida <u>32221</u>
		(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 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 Type of Action <u>Address</u> <u>Title</u> Name 1 ☐ Add Remove ☐ Add Remove Remove ☐ Add Remove _ Add Remove ☐ Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 27 Signature of a member or authorized representative of a member Ronald W. Fussell Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00