## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : I20070000020
Phone : (813)435-3176
Fax Number : (813)333-6358

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

WHITE BOTTOM, LLC

OB JUN 19 PH 12: 43
SECTION 19 PH 12: 43
TALLAHASSEE, FLORIDA

## Certificate of Status 0 Certified Copy 0 Page Count 01 Estimated Charge \$25.00

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ALLAHASSEE, FLORIDA

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6/19/2008

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	WHITE BOTTOM, LLC	S2 5		
(Name of the Limite	Liability Company as it now appears on our records. A Florida Limited Liability Company)	A		
The Articles of Organization for this Limited L	iability Company were filed on 04/25/2007	and assigned		
Florida document number 1.07000043829				
This amendment is submitted to amend the following	lowing:			
A. If amending name, <u>enter the new name c</u>	f the limited liability company here:			
"L.L.C."	th the words "Limited Liability Company," the designation	on "LLC" or the abbreviation		
Enter new principal offices address, if applic	ADIe:	<del></del>		
(Principal office address MUST BE A STRE)	ST ADDRESS)			
• •				
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	BOX)			
	,			
B. If amending the registered agent and registered agent and/or the new registered o	or registered office address on our records, <u>entr</u> Mice address here:	er the name of the new		
Name of New Registered Agent:	THE LAW OFFICES OF NICK SPRADLIN, PLLC			
New Registered Office Address: 12000 NORTH DALE MABRY HIGHWAY, #110				

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.

(City)

**TAMPA** 

Registered Agent, Signature of New Registered Agent)

(Enter Florida street address)

Florida 33618

(Zip Code)

Page 1 of 2

MGR - Manager

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:

MGRM = Managing Member					
Title	Name	Address	Type of Action		
			Add Remove		
	·		Add Remove		
		·	Add		

08 JUN 19 AM 8:40 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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D. If am	ending at	ny other infor	mation, ent	er change(s)	here: (	Attach additio	onal sheets, if nec	essary.)	
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Dated <u>6/*</u>			1-	, 2008	· ·		·		
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