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J. BRYAN

OCT 21 2010

EXAMINER

COVER LETTER

	istration Section ision of Corporations	·	
SUBJECT:	Ft. Walton 6	Beach Charities LLC	
		nited Liability Company	
	Articles of Amendment and fee(s) are su all correspondence concerning this matter	-	
	J	ames W. LaFollette, Jr.	
		Name of Person	75 5
	Eme	rald Coast Science Center	PILE MIGHTS
		Firm/Company	20 /5
		139 Brooks St SE	
	_	Address	LORING TO
	For	: Walton Beach, FL 32548	
		City/State and Zip Code amieL@ecscience.org	, "
	E-mail address:	(to be used for future annual report notific	ation)
For further in	formation concerning this matter, please	call:	
	James LaFollette	at (664-1261
	Name of Person	Area Code & Daytime	Telephone Number
Enclosed is a	check for the following amount:		
\$25.00 Fi	ling 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:	STREET/COURIE Registration Section	

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

	<u> Walton Beach Charities L</u>		
(<u>Name of the Limite</u>	d Liability Company as it now apper A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited I	· · · · —	April 26, 2007	and assigned
Florida document number L0700004			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability company he	ere:	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Comp	pany," the designation "I	LLC" or the abbreviatio
Enter new principal offices address, if appli	cable:		TS O
(Principal office address MUST BE A STRE	ET ADDRESS)		昌雪雪
	****		2 7
Enter new mailing address, if applicable:			5-8
<u>(Mailing address MAY BE A POST OFFICE</u>	E BOX)		- 5
			<u> </u>
B. If amending the registered agent and	or registered office address on	our records, enter t	the name of the nev
registered agent and/or the new registered (
Name of New Registered Agent:	James W. LaFollette, Jr.		
New Registered Office Address:	139 Brooks St SE	<u></u>	
	Enter Florida street address		
	Fort Walton Beach	, Florida	32548
	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 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 <u>Title</u> <u>Name</u> <u>Address</u> Type of Action MGR Leo J. Donnelly, Jr. 106 Racetrack Road ☐ Add Fort Walton Beach, FL 32547 Remove MGR James W. LaFollette, Jr. 139 Brooks St SE ✓ Add Fort Walton Beach, El. 32548 Remove ☐ Add ☐ Remove ∏Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 18 2010 Dated_ per or authorized representative of a member James W. LaFollette, Jr. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00