## L07000047291

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10 MAY -4 PM 4: 14
SECRETARY OF STATE
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## **COVER LETTER**

то:	Registration Section Division of Corporations	<u></u>			
SUBJ	ECT·	LINDSA	YGLASSPR LLC		·
30130	<u></u>		nited Liability Company		<del></del>
The er	nclosed Articles of Amendmer	t and fee(s) are su	ubmitted for filing.		
Please	return all correspondence con	cerning this matte	er to the following:		
520 N. ORLANDO AVENUE LOFT 44					
	<del>-                                    </del>		Address		
		WINT	TER PARK, FL 32789-	2946	
			City/State and Zip Code		
E-mail address: (to be used for future annual report notification)					
For fu	rther information concerning t			,	
	LISA KEPI	cs	at (_407_)	215-7	
	Name of Person		Area Code &	Daytime Telepl	hone Number
Enclos	sed is a check for the following	g amount:			
\$2:		Filing Fee & Lificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed)	3\$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

		10 MAY	<i>,</i>
LINDSAYGLA	ASSPR. LLC	10 MAY -4 PM	4: 14
(Name of the Limited Liability Compa) (A Florida Limited L	ny as it now appears on our liability Company)	records AHASSEE, FL	TATE! ORIDA
The Articles of Organization for this Limited Liability Company	were filed on05 03	2007 and a	ssigned
Florida document number	,	l	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
LINDSAY DICKS M	ARKETING LLC		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the d	esignation "LLC" or the	e abbreviatior
Enter new principal offices address, if applicable:	520 N. ORLANDO A	VENUE LOFT 44	
(Principal office address MUST BE A STREET ADDRESS)	WINTER PARK, FL	32789-2946	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		rds, <u>enter the name</u>	of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		Florida	
	Citv	Zip Co	de

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>	Address	Type of Action			
			Add Remove			
			Add Remove			
<del></del>			Add Remove			
			Add Remove			
			Add Remove			
<u></u>			Add Remove			
D. If amen — — —	nding any other information, enter change	(s) here: (Attach additional sheets, if necessary)	FILED			
Dated	APRIL 26 2010	<u> </u>	<del></del>			
		or authorized representative of a member				
		or printed name of signee				

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Filing Fee: \$25.00