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DIVISION OF COMPORATIONS

10 FEB -4 PM 1: 23

T. HAMPTON
FEB - 5 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JOHN & Shelly Van Zile; LLC Name of Limited Liability Company		
·		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Shelly Vanzile Name of Person		
SONG SILLY VON ZIL, UC		
18 Woodgote Cauet		
ORMAND Beach, 72 32174 City/State and Zip Code		
Shelly Vanzile 333 a yaho, com Elmail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Shelly Van3; Le at 380 340-4938 Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\sum \text{S30.00 Filing Fee & Certificate of Status}\$\$ \text{Certificate of Status}\$\$ \text{Certified Copy (additional copy is enclosed)}\$\$ \text{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

JOHN Van Zile	LLC
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 07 0000 5 2 84.3</u>	vere filed on <u>Feb, 2, 2010</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil The new name must be distinguishable and end with the words "Limite" L.L.C."	LLC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1460 Ocean Shore Blyd Ormand Bloch, FL=
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ERETARY OF COR
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
Name of New Registered Agent: New Registered Office Address:	y Vanzik Ocean Shore BlvD Enter Florida street address
Ormono	Bloch, Florida 32176 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

r changing Registered Agent, <u>Signiture of New Reg</u>

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

Title **Address Type of Action** Name helly Vanzile Remove ☐ Add Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Chileran a menuber or authorized representative of a member OHN VanZ;/e
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00