

LD 7000059928

Florida Department of State
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To:
Division of Corporations
Fax Number : (850) 617-6383

L. SELLERS

From:
Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : I20070000020
Phone : (813) 435-3176
Fax Number : (813) 333-6358

AUG - 7 2008

EXAMINER

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

NEW DESTINY, LLC

Certificate of Status	0
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NEW DESTINY, 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 Liability Company were filed on 06/22/2007 and assigned
Florida document number L07000059928

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

TH LAW OFFICES OF NICK SPRADLIN, PLLC.

New Registered Office Address:

12000 N. DALE MABRY HIGHWAY, SUITE 110

(Enter Florida street address)

TAMPA

(City)

Florida 33618

(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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

08 / 04 , 2008

Signature of a member or authorized representative of a member

NICK Spradlin Authorized member

Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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