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(Re	questor's Name)				
(Ad	dress)				
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(Cit	:y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
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Certified Copies	Certified Copies Certificates of Status				
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Special Instructions to	Filing Officer				
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Office Use Only



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C. LEWIS

JUL 1 0 2009

EXAMINER

	COVER LETTER	·.			
TO: Registration Section Division of Corporations					
se.					
SUBJECT: SAWS MARKET L	mited Liability Company	•			
Name of Li	inited Liability Company				
The surface of Assistance Assista	ork and the officer				
The enclosed Articles of Amendment and fee(s) are s	-				
Please return all correspondence concerning this matt	ter to the following:				
1010	Tu- 105				
	Name of Person				
SALUS	202				
	MARKATHE GOUP Firm/Company				
17590	VITTORIA WAY				
	Address				
	239,7				
	City/State and Zip Code				
•	SALUS @ 6MAIL. COM : (to be used for future annual report notification	and the state of t			
	•	on)			
For further information concerning this matter, please	e call:				
LANDON THOMAS	at (<u>239)</u> <u>948 - 36</u> Area Code & Daytime Te	49			
Name of Person	Area Code & Daytime Te	lephone Number			
Enclosed is a check for the following amount:	□055 00 E11 E 9.	Meco oo rii r			
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$		□\$60.00 Filing Fee, Certificate of Status &			
	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)			
MAILING ADDRESS:	CTD FET/COLIDIED	ADDD Description			
n S ectio	STREET/COURIER Registration Sectio	ADDR Essegistratio			
Division of Corp ions orat P.O. Box 6327	P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2009 JUL -9 PM 1: 07

SAWS MARKE	عاد ۱۲۰	brase,	LLC	SEC	RETARY OF STATE
(Name of the Limited Lia (A Flo	ibility Compai orida Limited L	ny as it now a Liability Compa	pears on our i	records.	AHASSEE, FLORID.
The Articles of Organization for this Limited Liabi		were filed on	Jun 76	, 7007	_ and assigned
Florida document number <u>L076000 7</u>	4918				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liab	ility company	here:		
The new name must be distinguishable and end with the "L.L.C."	ne words "Limi	ted Liability C	ompany," the d	esignation "LLC	C" or the abbreviation
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>				
B. If amending the registered agent and/or registered agent and/or the new registered office			on our reco	ds, enter the	name of the new
Name of New Registered Agent:			······································		
New Registered Office Address:					
		G!.		la street addre Florida	SS
-		City	<u>, a, </u>	·	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 Title Name Address Type of Action MGRM BADDY GRAHAM ☐ Add ₩ Remove MARK ENGLE DOW M FRZ 12590 VINTONIA WAM □ Add FAIR MARY FL 33917 .Remove ☐ Add ☐ Remove ☐ Add □ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) BARRY AND MARK AME BEISL REMINER PAR THE MEGTIAL NOTES ON 11/15/08 AND THANSFER OF ADDRESHIP BYEW TO ON 11/15/08 Dated <u>Sun</u> 6, 2009. Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00