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SECRETARY OF STATE

M. Thomas APR 15 2008

## **COVER LETTER**

TO: Registration Se Division of Cor			•	
SUBJECT: Princess	Lady Holding Group, L	LC		
· · · · · · · · · · · · · · · · · · ·	(Name of Lim	ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Linda M. Nelson			
		(Name of Person)		
	Princess Lady Holdin	ng Group, LLC		
		(Firm/Company)		
	127 Marina Drive			0
		(Address)		<b>E</b> 99 <b>E</b>
	La Crosse WI 54603	3		40000000000000000000000000000000000000
		(City/State and Zip Code)		發 三 由
For further information c	oncerning this matter, please c	all:		PILED  RECPENSISE FLORID  SECRETARISSEE FLORID  TALLAHASSEE FLORID
Linda M. Nelson		at ( 608 ) 791-3503		夏州 一
(Name	of Person)	(Area Code & Daytime	Telephone Number)	<u></u>
Enclosed is a check for the	ne following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing F Certificate of Certified Cop (additional co	Status &

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

( <u>Name of the Limited I</u> (A)	Liability Company as it now appears on our recor Florida Limited Liability Company)	<u>ds.</u> )
ne Articles of Organization for this Limited Lia	ability Company were filed on August 6, 2007	and assigned
orida document number <u>L0700080844</u>	·	
nis amendment is submitted to amend the follow	owing:	08 PR 14
. If amending name, enter the new name of		100 mg
ie new name must be distinguishable and end with		asian til I (")) ansklan alalamitikasiant
If amending the registered agent and/o	or registered office address on our records,	ORDA
If amending the registered agent and/o	or registered office address on our records,	ORDA
If amending the registered agent and/o	or registered office address on our records,	ORDA
L.C."  If amending the registered agent and/or the new registered off	or registered office address on our records, <u>s</u> fice address here:	enter the name of the new
If amending the registered agent and/or gistered agent and/or the new registered off  Name of New Registered Agent:	or registered office address on our records,	enter the name of the new
If amending the registered agent and/or gistered agent and/or the new registered off  Name of New Registered Agent:	or registered office address on our records, <u>s</u> fice address here:	enter the name of the new

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Mike Bobinchuck	3813 Weymouth Woods Drive Medina OH 44256	Add Remove
<u>MGRM</u>	Bobinchuck Holdings, LLC	3813 Weymouth Woods Drive Medina OH 44256 MGRM	Add Remove
MGRM	Noel Jordan	127 Marina Drive LaCrosse WI 54603	Add 8
MGRM_	NCJ, LLC	127 Marina Drive LaCrosse WI 54603	Add CA
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
_	A - A		<del></del>
Dated April	tillfinh		
	Noel Calocdon	er or authorized representative of a member d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00