## L07000088514

| (Requestor's Name)                      |  |  |  |  |  |
|---|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |

Office Use Only



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SECRETÁRY OF STATES

| MAR -3 AM | 1:59

J. SAULSBERRY EXAMINER MAR 0 4 2011

## **COVER LETTER**

| то:           | Registration S<br>Division of Co |   |   |  |
|---------------|----------------------------------|---|---|--|
| SUBJE         | ECT:                             | Kubota Trad   | tors & Rentals, LLC   |  |
| 00201         |                                  | Name of Lim   | ited Liability Company  |  |
| The end       | closed Articles o                | of Amendment and fee(s) are su  | bmitted for filing.   |  |
| Please        | return all corresp               | condence concerning this matte  | r to the following:   |  |
|               |                                  |   | David Lamont  |  |
|               |                                  |   | Name of Person  |  |
|               | The Lamont Law Office            |   |   |  |
|               |                                  |   | Firm/Company  |  |
|               | Post Office Box_6026             |   | <del>;il</del> ~  |  |
|               |                                  |   | Address   | SEC  |
|               | Clearwater, FL 33758             |   |   |  |
|               |                                  |   | City/State and Zip Code   | AASSE  |
|               |                                  | Susan.va<br>E-mail address:   | ughan@lamontlawgroup.com to be used for future annual report notification   |  |
| For fur       | ther information                 | concerning this matter, please  |   | 2011 MAR -3 AH 11:59 SECRETARY OF STATE  |
|               |                                  | David Lamont  |   | -8393  |
|               | Name                             | of Person   | Area Code & Daytime Tele  | phone Number   |
| Enclose       | ed is a check for                | the following amount:   |   |  |
| <b>₹</b> \$25 | .00 Filing Fee                   | \$30.00 Filing Fee & Certificate of Status  | S55.00 Filing Fee & Certified Copy (additional copy is enclosed)  | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|               | Regis<br>Divisi<br>P.O. E        | LING ADDRESS:<br>tration Section<br>ion of Corporations<br>30x 6327<br>nassee, FL 32314 | STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center O Tallahassee, FL 32301 | 3  |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Kubota Tra   | actors & Rentals, LL         | <u>C                                    </u> |                        |  |
|--|------------------------------|--|------------------------|--|
| ( <u>Name of the Limited Liability</u><br>(A Florida)              | Limited Liability Company)   | on our records.)                             |                        |  |
| The Articles of Organization for this Limited Liability C          | Company were filed on        | 8/28/07                                      | and assigned           |  |
| Florida document number L0700088514                                | <del></del> ·                |  |                        |  |
| This amendment is submitted to amend the following:                |                              |  |                        |  |
| A. If amending name, enter the new name of the lim                 | ited liability company here  | :  |                        |  |
| Blue Ridge T   | ractors & Rentals, LLC       |  |                        |  |
| The new name must be distinguishable and end with the wor "L.L.C." | ds "Limited Liability Compan | y," the designation "L                       | LC" or the abbreviatio |  |
| Enter new principal offices address, if applicable:                |                              |  |                        |  |
| (Principal office address MUST BE A STREET ADDR                    | RESS)                        |  |                        |  |
|  |                              |  | SEC                    |  |
|  |                              | AH   |                        |  |
| Enter new mailing address, if applicable:                          |                              |  | - ω I                  |  |
| (Mailing address MAY BE A POST OFFICE BOX)                         |                              | Į.   | O P IT                 |  |
|  |                              |  | S E C                  |  |
|  |                              | 31   | .59                    |  |
| B. If amending the registered agent and/or regist                  |                              | r records, enter f                           | le name of the new     |  |
| registered agent and/or the new registered office addr             | ess nere:                    |  |                        |  |
| Name of New Registered Agent:                                      |                              |  |                        |  |
| New Registered Office Address:                                     |                              |  |                        |  |
|  | Enter Florida street address |  |                        |  |
|  |                              | . Florida                                    |                        |  |
|  | City                         |  | 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 = N     | Managing Member                           |   |                        |
|--------------|---|---|------------------------|
| <u>Title</u> | <u>Name</u>                               | Address   | Type of Action         |
| <del></del>  |   |   | Add<br>Remove          |
|              |   |   | Add Remove             |
|              |   |   | Add<br>Remove          |
|              |   |   | Add<br>Remove          |
|              |   |   | Add<br>Remove          |
| D. If amend  | ling any other information, enter change( | (s) here: (Attach additional sheets, if necessary | Add Remove  CRE HAR -3 |
|              |   |   | AM II: 59              |
| Dated        |   |   |                        |
|              | -   | or authorized representative of a member          |                        |
|              | Typed or                                  | David Lamont r printed name of signee             | THE TAXABLE PARTY.     |

Page 2 of 2

Filing Fee: \$25.00