

207000089029

(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:

A. LUNT

DEC - 2 2009

EXAMINER

Office Use Only



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11/19/09--01044--020 **35.00

FILED
2009 DEC -1 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 23, 2009

BARBARA FITZMAYER
5063 HIGHWAY 90
MILTON, FL 32571

SUBJECT: LODGE HOLDING ENTERPRISES OF MILTON, LLC
Ref. Number: L07000089029

We have received your document for LODGE HOLDING ENTERPRISES OF MILTON, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 109A00036269

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Lodge Holding Enterprises of Milton LLC

DOCUMENT NUMBER: L07000089029

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara Fitzmayer

Name of Contact Person

Firm/ Company

5063 Highway 90

Address

Milton, FL 32571

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Fitzmayer

Name of Contact Person

at (850)

324-1249

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2009 DEC - 1 PM 1:27

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Lodge Holding Enterprises of Milton, 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 8/29/2007 and assigned
Florida document number L07000089029

This amendment is submitted to amend the following:

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

N/A

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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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2007 DEC -1 PM 1:27
TALLAHASSEE, FLORIDA
CLERK OF STATE

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:

N/A

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.

N/A

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

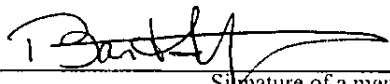
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|--|--|
| MGRM | PAT Jewell | 4540 STRUTH LN MILTON, FL 32571 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGRM | Joe Flowers | 4124 PDLK AVE MILTON, FL 32571 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | Brian Lee | 2508 W Michigan Ave PENSACOLA, FL 32526 | <input type="checkbox"/> Add <input checked="" 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)

N/A

Dated 29 Nov, 2009



Signature of a member or authorized representative of a member

Barbara Fitzmayer

Typed or printed name of signee

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29 DEC 7 PM 1:27
CLERK OF STATE
TALLAHASSEE, FLORIDA