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2009 JAN - 7 AM 11: 32 SECRETARY OF STATE TALLAHASSEE, FLORID

T. CLINE

JAN - 8 2009

EXAMINER

COVER LETTER

TO: Registration Secti Division of Corpo		
· · · · · · · · · · · · · · · · · · ·	BLONDIES ON OCEAN L.L.C.	
SUBJECT:	(Name of Limited Liability Company)	<u> </u>
•	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of Art	nendment and fee(s) are submitted for filing.	
Please return all correspond	ence concerning this matter to the following:	
,	PATRICIA HICKEY - REID	
T	(Name of Person)	
	BLONDIES ON OCEAN	•
	(Firm/Company)	······································
	3300 OCEAN DRIVE	
3	(Address)	
	VERO BEACH, FLORIDA 32963	
	(City/State and Zip Code)	TALL SEC
For further information con-	cerning this matter, please call:	
PATRICI	A HICKEY - REID at (772) 812-4396	-7 I
(Name of I		ZOMJAN - 7 AN II: 32 SECRETARY OF STATE TALLAHASSEE FLORID
Enclosed is a check for the	following amount:	TE 32
	Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	0 Filing Fee, tificate of Status & tified Copy ditional copy is enclosed)

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

BLONDIES ON OC		
(Name of the Limited Liability (A Florida)	y Company as it now appears on o Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability C	Company were filed on <u>Septem</u>	ber 17, 2007 and assigned
Florida document number <u>L07000095046</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wo	rds "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		200 SE
• •	DECC)	De de constant
(Principal office address MUST BE A STREET ADDI	(E33)	
		S A
Enter new mailing address, if applicable:		- o - 1
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	00 N 3
B. If amending the registered agent and/or registered agent and/or the new registered office add		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter F	lorida 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 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 Address Type of Action lisabeth Ely Remove Remove Remove Ada Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Add Article VI as follows: A member may voluntarily resign from the Company upon submitting The effective date of the resignation shall a Notice of Resignation. be the date specified in the Notice of Resignation. The effective date of this Amendment shall be $1 - \sqrt{1 - 2000}$ December 24, and 2008 Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00