

L07000097494

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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**A. LUNT**  
SEP - 5 2008  
**EXAMINER**

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TALLAHASSEE, FLORIDA

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**BARBARA SANDERS**

ATTORNEY AT LAW  
80 MARKET STREET  
APALACHICOLA, FLORIDA 32320

REPLY TO:  
POST OFFICE BOX 157  
APALACHICOLA, FLORIDA 32329

TEL (850) 653-8976  
FAX (850) 653-8743  
E-MAIL bsanders@gtcom.net

September 3, 2008

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

Re: LYNMARK, LLC

Dear Records Custodian,

Enclosed please find check # 735 in the amount of \$25.00 for change fee, the Cover Letter and an Amendment to the Articles of Organization form for the above referenced LLC. Please contact our office with any questions. Thank you for your assistance with this matter.

Sincerely,

  
Ronnie Wallace  
Office Manager

encl.

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2008 SEP -11 P 3:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LYNMARK, LLC**  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lynn Wilson  
(Name of Person)

LYNMARK, LLC  
(Firm/Company)

127 Avenue B  
(Address)

Apalachicola, FL 32320  
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Lynn Wilson at ( 305 ) 588-5885  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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 Fee, Certificate of Status & Certified Copy (additional 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**

LYNMARK, 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 9-25-2007 and assigned Florida document number L0700097494.

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)**

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

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TALLAHASSEE, FLORIDA

**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:** N/A

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 = Managing Member

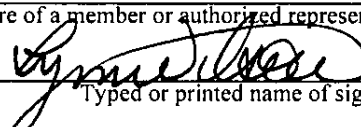
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<del>MGRM</del>	<del>Lynn Spohrer</del>	<del>127 Avenue B Apalachicola, FL 32320</del>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Lynn Wilson	127 Avenue B Apalachicola, FL 32320	<input checked="" type="checkbox"/> Add <input 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
			<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

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 2008 SEP -4 P 3:50  
 SECRETARY OF STATE  
 TALLAHASSEE, FL 32304

Dated September 2, 2008

Signature of a member or authorized representative of a member  
 Lynn Wilson   
 Typed or printed name of signee