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BOVAY & COOK, P.A.

ATTORNEYS AT LAW 901 N.W. 57" STREET GAINESVILLE, FLORIDA 32605

JOHN C. BOVAY*1 LL.M. IN TAXATION ALSO ADMITTED IN DISTRICT OF COLUMBIA JULIA M. COOK LL.M. IN TAXATION

TELEPHONE 352-331-9092 FACSIMILE 352-331-6895 www.bovaycook.com jack@bovaycook.com julie@bovaycook.com

*BOARD CERTIFIED IN TAX LAW

BOARD CERTIFIED IN WILLS, TRUSTS & ESTATES LAW

July 30, 2008

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

Dear Sir or Madame:

Enclosed please find Articles of Amendment for Edmonds, LLC. Also included is check for \$55 to cover the cost of filing fees and a certified copy.

Sincerely,

BOVAY & COOK, P.A.

Carly Valenty for John C. Bovay

JCB:cv

Xc: Erik Edmonds Rose Charboneau

COVER LETTER

TO: Registration So Division of Cor					
SUBJECT: <u>Edmond</u>	S , LLC (Name of Lim	ited Liability Company)			
	Amendment and fee(s) are sub ondence concerning this matter	_			
	Julie Cook	(Name of Person)			
	Bovay & Co	ok, P.A. (Firm/Company)			
	901 NW 57t	h STreet (Address)	<u> </u>		
	Gainesvill	e, FL 32605 (City/State and Zip Code)			
For further information of	concerning this matter, please c	all:			
Julie Cook (Name of Person)		at (352) 331-9092 (Area Code & Daytime Telephone Number)			
Enclosed is a check for t	he 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		STREET/COURIER	ADDRESS		

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

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**



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SECRETARY OF STATE

Edmonds, LLC			•	HASSEE FLORIDA	
(Name of the Limited Liabil (A Florid	lity Company la Limited Lia	as it now appears on our bility Company)	records.)		
he Articles of Organization for this Limited Liability Company were filed on 10/11/07 and assigned					
Florida document number <u>L07000103638</u>	·				
This amendment is submitted to amend the following	;				
A. If amending name, enter the new name of the li	imited liabili	ty company here:			
The new name must be distinguishable and end with the v "L.L.C."	words "Limited	d Liability Company," the	designation "	LLC" or the abbreviation	
Enter new principal offices address, if applicable:	519 D NW 10th Avenue				
(Principal office address MUST BE A STREET AD	DRESS)	Gainesville, FL 32601			
Enter new mailing address, if applicable:		519 D NW 10th Av	enue		
(Mailing address MAY BE A POST OFFICE BOX)		Gainesville, FL 32601			
B. If amending the registered agent and/or regregistered agent and/or the new registered office a	•	e address on our reco	ords, <u>enter</u>	the name of the new	
Name of New Registered Agent:	Rose Charboneau				
New Registered Office Address:	New Registered Office Address: 519 D NW 10th Avenue (Enter Florida street address)				
	Gainesvi	lle	, Florida	32601	
·		(City)		(Zip Code)	
New Projectored Agent's Signature, if changing Projects	red Agents				

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 Title Address **Type of Action** Name 3955 S.W. 3rd Avenue MGRM Erik Edmonds ☐ Add Gainesville, FL 32607 Remove 519 D NW 10th Avenue MGRM Rose Charboneau **∑** Add Gainesville, FL 32601 Remove 🗂 Add Remove ☐ Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ___ July 31, 2008 Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Carly Valenty

Filing Fee: \$25.00