

LD7000107423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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JUL 21 2009

EXAMINER

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07/20/09--01025--013 **30.00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

09 JUL 20 PM 2:56

FILED

July 18th, 2009

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

2 Shanes LLC
7550 Mission Hills Dr., STE 306
Naples, FL 34119
239.777.2039

TO: Registration Section

RE: LLC Ammendment

Enclosed you will find a check for \$30 to file and receive certified copy of Ammendment to LLC

Sincerely,

A handwritten signature in black ink, appearing to read "Shane G Robb". The signature is stylized with a large, sweeping initial "S" and a long horizontal stroke extending to the right.

Shane G Robb
Managing Member

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

2 Shanes 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 10/22/2007 and assigned
Florida document number L07000107423.

This amendment is submitted to amend the following:

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

1 Shane, LLC

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)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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

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TALLAHASSEE, FLORIDA

[Handwritten signature]

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	Wallace, Shane	496 Crossfield Circle Naples, FL 34104	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Robb, Ryan	496 Crossfield Circle Naples, FL 34104	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Robb, Shane Gentry	10020 Coconut Rd STE 142 Bonita Springs, FL 34135	<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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 16th, 2009


Signature of a member or authorized representative of a member

Annette Tomlinson
Typed or printed name of signee

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 TALLAHASSEE FLORIDA