L0700008304

(Requestor's Name)	
- (Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT I	MAIL
(Dusings Fakh, Nama)	• •
(Business Entity Name)	
(Document Number)	
Certified:Copies Certificates of Status	ı
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Special Instructions to Filing Officer:

A. LUNT

JUL 24 2009

EXAMINER

Office Use Only



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Ruel & Heather Scott 14421 Lake Jessup Drive Jacksonville, FL 32258

July 17, 2009

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

Re: Nessa Enterprises LLC; Amendment: Registered Agent

Dear Sir / Madam:

Please see amendment to Registered Agent for Nessa Enterprises LLC. Thanks.

j

Sincerely

Ruel Scott

Heather Scott

COVER LETTER

Division of Cor	porations		
SUBJECT: Nessa Enter	rprises L. L. C		
	Name of Limite	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
•	Ruel or Heather Scott		
		Name of Person	
	Nessa Enterprises L. L. C.		
		Firm/Company	
	14421 Lake Jessup Drive		
		Address	
	Jacksonville, FL 32258		
		City/State and Zip Code	
	bizm@jaroc.net	be used for future annual report notifical	dian)
		•	uon)
For further information c	oncerning this matter, please ca	ill:	
Ruel	Scott	at (<u>904</u>) 710-5437	
Name o	f Person	Area Code & Daytime T	elephone Number
Enclosed is a check for the	ne 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:

TO:

Registration Section

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

	Nessa Enterprise	s L. L. C	
(Name of the Limited (A	Liability Company Florida Limited Liab	as it now appears on our record ility Company)	<u>s.</u>)
The Articles of Organization for this Limited Li Florida document number L07000108304	ability Company we	ere filed on October 25, 2007	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liabilit	y company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited	Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
	-		
Enter new mailing address, if applicable:	_	***************************************	
(Mailing address MAY BE A POST OFFICE)	BOX)		
	-	······································	
B. If amending the registered agent and/oregistered agent and/or the new registered of		e address on our records, <u>e</u>	nter the name of the new
Name of New Registered Agent:	Heather Sc	ott	
New Registered Office Address:	14421 Lake Jessup	Drive	
	Enter Florida stre	et address	
	Jacksonville	, Flori	
	(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 = Manag MGRM = Man	er aging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
<u>. </u>			Add Remove
			Add
			Remove
			Add Remove
			Add Remove
			Add Remove
D. If amending	gany other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
			_
Dated July 14	Signature of a member of	or authorized representative of a member	-
	· ·	Heather Scott	

Page 2 of 2

Filing Fee: \$25.00