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2008 SEP 16 A II: 02
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Roundtree & Associates, 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:	
Sir Darry D. Boundtree (Name of Person)	
Roundfree & Associates, LLC En 3	77
Roundfree & Associates, LLC (Firm/Company) 3158 Forest Grow Trail NW (Address) Acworth, GA 30101 (City/State and Zip Code)	TI FIELD
Acworth, G-A 30101 (City/State and Zip Code)	1: 02
For further information concerning this matter, please call:	
SirDarry D. Roundfree at (678) 933-1968 (Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

Roundtree & Associate	es, LLC	
(Name of the Limited Liability Compa (A Florida Limited)	aný as it now appears on our record Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on $\frac{ 0/3 /07}{}$	and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	bility company here:	TALLAHASS
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Company," the designa	ation "LECFor the abbrevation"
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)	3158 Forest Ora Acworth, GA 3010	ove Trasl NW
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida str	reet address)
	, Flori	ida
	(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>Address</u> **Type of Action** Name **Title** SirDarry Roundtree 3158 Forest Grove Trl Acworth, GA 30101 MGR 6573 Flowers Ave Natalic Kohn MGRM Jackson ville, FL 3-1144 Veronica Roundtree 3151 Forest Grove Trl Acmorth, GA 30101 16 R 14 Add ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary). Dated Sir) arry D. Roundtree
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00