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SECRETARY OF STATE SHVISTON OF CORPORATIONS

J. BRYAN'

APR 2 1 2003

EXAMINE

CABOOSE CONCEPT GROUP LLC

932 Sidney Terrace NW Port Charlotte, Fl 33948 carley@nixco.com 239.537.2037

4/15/08

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

Dear Registration Section,

I sent documents for changes to an existing registration which was Stellar Cellars LLC with name change to Caboose Concept Group, LLC some changes to the members and the EIN number. This was about March 14 when I mailed the documents to you. I haven't heard anything from you nor is anthing posted on the website.

I am sending copies of the documents I sent.

Regards,

Carley Nix Manager SECRETARY OF STATEMS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: STELLAR CRUARS TLC (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:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CARLEY Nix (Name of Person)
CARLEY Nix (Name of Person) STELLAR CELLARS LCC (Firm/Company)
22S4 TEA ST. (Address) POYT CHARLOTTE, F1 33948 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S\$55.00 Filing Fee & S\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$40.00 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

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

ARTICLES OF ORGANIZATION
OF

STEWAR CRAME CRAME

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.

(City)

(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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
Marm	Cindy L Nix	GOIT PINT RIDGE RD NAPLES, 71 34119	Add Remove
Marin	Nicore Nix	7254 TEA ST POYT CHARLOTTE, 71	Add Add Remove
marm	Thomas C. Nix	932 Sidney Tun NW Port Charcher, 71 33988	Add Remove
			Add Remove
			Add Remove
	 		Add Remove
		e(s) here: (Attach additional sheets, if necessary.)	
——————————————————————————————————————	ddress: 932 Sidn Port Chan	ген Terrace егопе, 71 33948	OR APR 18 ANIO. I
Dated	·	·	A TIONS
	Signature of a member of CAR	or authorized representative of a member	
	Typed o	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00