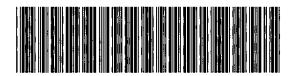
L07000113079

(Requestor's Name)	
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DIVISION OF CORPORATIONS
ON JAN -5 AM 8: 56

J. BRYAN

JAN - 6 2009

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Name of Limi	Offent Group LL ited Liability Company)	<u>C</u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
,		-	y
Please return all correspon	ndence concerning this matter	to the following:	,
•••	Crea Unified 13500 Rodge Largo F	Name of Person) Oevelopment Crom (Firm/Company) (Address) (City/State and Zip Code)	OG JAH -5 AM 8: N
For further information co	oncerning this matter, please or	all·	F . T
	, page 4		
(Name o	rwer f Person)	at (727) 744-50 (Area Code & Daytime T	elephone Number)
Enclosed is a check for th	e 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:

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 (A Florida Limited Liability Company) Florida document number <u>L0700011307</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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)

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 <u>Name</u> **Address Type of Action** Remove ☐ Add Remove Add 🗂 🗖 Remove ☐ Add· Remove Remove Add 🗂 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 12-30-2008 Signature of a member or authorized representative of a member Srewer Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00