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SECRETARY OF STATE
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AHASSEE. FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ROCK LED GE 1900, 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:
RICHARD K DUTTER (Name of Person)
(Firm/Company)
2500 NE COACHMAN ROAD
(City/State and Zip Code) (Firm/Company) CACHMAN ROAD (Address) (City/State and Zip Code)
For further information concerning this matter, please call:
RICHARD K OUTTER at (727) 450-1901 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Solution} \$\ \text{Solution}\$ \$\ \text{Certificate of Status}\$\$ \$\ \text{Certified Copy} \ \ \text{(additional copy is enclosed)}\$\$ \$\ \text{Certified Copy} \ \ \text{(additional copy is enclosed)}\$\$ \$\ \text{Certified Copy} \ \ \text{(additional copy is enclosed)}\$\$ \$\ \text{Certified Copy} \ \ \text{(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

\cap	•	•	
ROCKLO	ED6E 1900	, LLC	
(Name of the Limited L (A F	liability Company as it now appears Plorida Limited Liability Company)	on our records.)	
		1,1,1,-	
The Articles of Organization for this Limited Liab	bility Company were filed on	14/07 and assigned	
Florida document number <u>L 07000 115</u>	5050.		
This amendment is submitted to amend the follow	wing:		
		08	
A. If amending name, enter the new name of t	the limited liability company here:	TEC 3	3 -1
	NIA	THE THE PARTY OF T	
The new name must be distinguishable and end with	the words "Limited Liability Company	," the designation "LLC" or the aborevia	tion
"L.L.C."		T. C.	ب
B. If amending the registered agent and/or	r registered office address on ou	r records enter the name of the	Sew F
registered agent and/or the new registered offi		Trecords, enter the name of they	<u>1077</u>
		.1.	
Name of New Registered Agent:		NIH	-
New Registered Office Address:			
	(Ente	er Florida street address)	
		, Florida	
	(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 Title ' **Type of Action** Name **Address** MGRM CHRISTOPHER M. DUTTER 7409 SOUTH RIVERCHASE OR Add Remove TEMPLE TERRACE FL BRIDGET A. BRENNY MGRM 650 ISLAND WAY ∏Add ∏Remove• Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 4/2, 08.

Signature of a member or authorized epresentative of a member RICHARD CONTER

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00