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**EXAMINER** 

S. HAWKES

NOVY 27009

EXAMINER

## **COVER LETTER**

Division of Co			
SUBJECT:	BREANNA BAILEY, LLC		
		ted Liability Company	<del>~~~~</del>
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	S	STEPHEN L. NALLEY	
		Name of Person	
		Firm/Company	
	2008 East Clovelly Lane		
		Address	
	Sail	nt Augustine, FL 32092	
	000	City/State and Zip Code	
	E-mail address: (	alleyphd@comcast.net to be used for future annual report notif	ication)
For further information	concerning this matter, please of	all:	
	phen L. Nailey	u:(	290-0599
Name	of Person	Area Code & Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAII	LING ADDRESS:	STREET/COURI	ER ADDRESS:

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

**BREANNA BAILEY, LLC** 

( <u>Name of the Limited Lia</u> (A Flo	ibility Company as it now appears orida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabil Florida document number		11/15/2007 and signed	
This amendment is submitted to amend the following	ng:	The state of the s	
A. If amending name, enter the new name of the	e limited liability company here	i Contraction	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Compan		
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO.)			
B. If amending the registered agent and/or registered agent and/or the new registered office		ir records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
-	711	, Florida	
New Registered Agent's Signature, if changing Regi	City	Zip Code	
Men Acquired agent a Dignature, it changing Negi	Sidied 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

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 amanding 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>Title</u> **Type of Action** <u>Name</u> **Address MGRM** Jessica K. Nalley . ☐ Add 2008East Clovelly Lane Saint Augustine, FL 32092 Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 11 2009 Dated ingnature of a member or authorized representative of a member Stephen L. Nalley Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00