L07000/20834

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TO:

Registration Section

Division of Con	rporations		
SUBJECT. THE W	ACO RAMBLERS L	LC	_
SUBJECT: THE VI		nited Liability Company)	
,			
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
·	Ţ.	•	
	DANIEL COSTELLO		
		(Name of Person)	
	THE WACO RAMBLERS	S LLC	200 TA
		(Firm/Company)	一篇 第 刊
	470 HOWARD ST.		HA R
		(Address)	2009 MAR 18 PM 1:28 SECRETARY OF STATE TALLAHASSEE, FLORID
•	NICEVILLE, FL 32578		FST
		(City/State and Zip Code)	28 DRID
For further information	concerning this matter, please o	all.	P
For further information (concerning this matter, please c	can.	
DANIEL COSTELLO		at (850) 586-2517 .	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	_	D055 00 Filian Fac 9	1 060 00 Elling Fee
□ \$25.00 Filing Fee	■\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
3.7.4.11	INC ADDRESS.	etheet/counten	ADDRECC.
MAILING ADDRESS: Registration Section		STREET/COURIER ADDRESS: Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301	
		rananassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

THE WACO RAMBLERS LLC

(Name of the Limited Liability Company as it now appears on our records)

(A Florida	Limited Liability Company)		
The Articles of Organization for this Limited Liability of Florida document number <u>L07000120834</u>	Company were filed on DECEMBER 05, 2007	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the designation "l	LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)	2009 TALL	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		MAR 18 PH	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>enter</u> t dress here:	1: 28 TATE ORID	
Name of New Registered Agent:			
New Registered Office Address:	(Enter Florida street ad	Means)	
	, Florida,	(Zip Code)	
New Registered Agent's Signature, if changing Registere	ed 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 MGRM DONALD DILLARD 90 MASON AVE. **.** Add SANTA ROSA BEACH, FL 32459 Remove ☐ Add Remove 🗂 Add Remove ☐ Add 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 14, '09 Signature of a member or authorized representative of a member Paniel Costello
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00