## L07000/2/484

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| (Address)                               |  |  |  |
|   |  |  |  |
| (Address)                               |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
| (Business Entity Name)                  |  |  |  |
| (Document Number)                       |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
| _                                       |  |  |  |
| A. LUNT                                 |  |  |  |
| MAR <b>25</b> 2010                      |  |  |  |

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Office Use Only

**EXAMINER** 

## **COVER LETTER**

| TO: Registration S Division of Co |   |   |  |          |
|-----------------------------------|---|---|--|----------|
| SUBJECT:                          | Second F                                      | land Goods, LLC   |  |          |
|                                   |   | ited Liability Company  | P-01-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1   |          |
| The enclosed Articles o           | f Amendment and fee(s) are su                 | bmitted for filing.   |  |          |
| Please return all corresp         | condence concerning this matter               | to the following:   |  |          |
|                                   |   | lames D. Brimingham   |  |          |
|                                   |   | Name of Person  |  |          |
| Firm/Company                      |   | 2010<br>TAL   | _  |          |
| - <del></del>                     |   | 1463 Larkin Road  | 2010 MAR 24 SECKE TAP'S TALLAHASS  | 71       |
|                                   |   | Address   |  |          |
|                                   | Sp  | ring Hill, Florida 34608  | OF STATE<br>EFFLORIO   |          |
|                                   |   | City/State and Zip Code   | 92A C  | ?<br>>   |
|                                   | jir<br>E-mail address: (                      | nbrim71@yahoo.com<br>to be used for future annual report notifica | ition)   | <b>ა</b> |
| For further information           | concerning this matter, please of             | -   | ·  |          |
| Jame                              | s D. Brimingham                               | at ( 727 ) 2  | 71-5039  |          |
| Name                              | of Person                                     | Area Code & Daytime   | elephone Number  | :        |
| Enclosed is a check for           | the following amount:                         |   |  |          |
| \$25.00 Filing Fee                | \$30.00 Filing Fee &<br>Certificate of Status | Certified Copy (additional copy is enclosed)                      | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclo | osed)    |
|                                   |   |   |  |          |

**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

| Second I   | <u> Hand Goods, LL</u>                           | <u>.C</u>   |   |             |
|--|--|---|---|-------------|
| (Name of the Limited Liability<br>(A Florida L   | Company as it now app<br>imited Liability Compan | ears on our records.)<br>y)                                 |   |             |
| The Articles of Organization for this Limited Liability Co<br>Florida document number <u>L07000121484</u>  | ompany were filed on _                           | December 6, 2007  | and ass   | igned       |
| This amendment is submitted to amend the following:  |  |   |   |             |
| A. If amending name, enter the new name of the limit   | ed liability company l                           | here:   |   |             |
|  | ım Enterprise, LLC                               |   |   |             |
| The new name must be distinguishable and end with the word "L.L.C."  | ls "Limited Liability Con                        | mpany," the designation "L                                  | LC" or the a                                      | bbreviation |
| Enter new principal offices address, if applicable:  |  | P   | 201   |             |
| (Principal office address MUST BE A STREET ADDRI   | ESS)   |   | OK R  |             |
|  | 4.4.11   | A HA  | R 22  |             |
|  |  | ()<br>[T]   | ₹ *   | П           |
| Enter new mailing address, if applicable:  | **************************************           | * 1   | <del>( "                                   </del> |             |
| (Mailing address MAY BE A POST OFFICE BOX)   | <del>- "</del>                                   | 93  | <b>F</b>  | ···         |
|  |  | <u> </u>  | , m   |             |
| B. If amending the registered agent and/or registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address: | ess here:  | n our records, <u>enter th</u><br>Enter Florida street addr |   | f the new   |
|  | "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 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 = N    | MGRM = Managing Member                             |   |                 |  |  |  |
|-------------|--|---|-----------------|--|--|--|
| Title       | <u>Name</u>  | Address   | Type of Action  |  |  |  |
|             |  |   | Add Remove      |  |  |  |
|             | <del>- , , , , , , , , , , , , , , , , , , ,</del> |   | AddRemove       |  |  |  |
|             | ****   |   | Add Remove      |  |  |  |
|             |  |   |                 |  |  |  |
|             |  | , , , , , , , , , , , , , , , , , , ,                   | A DRemove       |  |  |  |
|             | -  | 1   | NAdd Concernove |  |  |  |
| D. If amend | ling any other information, ente                   | r change(s) here: (Attach additional sheets, if necessa | <u> </u>        |  |  |  |
|             |  |   | · · · · ·       |  |  |  |
|             |  |   | <del></del>     |  |  |  |
| Dated       | March, 19 ,  | 2010  |                 |  |  |  |
|             | Signature of a                                     | member or authorized representative of a member         |                 |  |  |  |
|             |  | James D. Brimingham Typed or printed name of signee     |                 |  |  |  |

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Filing Fee: \$25.00