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Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG

PLEASANT OAK EQUESTRIAN CENTER, LI

| Certificate of Status | 0       |
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| Certified Copy        | 0       |
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12/17/2007

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## PLEASANT OAK EQUESTRIAN CENTER, 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 Liabi  | ity Company were filed on 12/1 | 0/07 and assigned                             |  |  |
|--|--------------------------------|---|--|--|
| Florida document number   07000122515  | ·                              |   |  |  |
| This amendment is submitted to amend the following   | <b>98</b> :                    |   |  |  |
| A. If amending name, enter the new name of th  | limited liability company here | •   |  |  |
| PLEASANT OAKS EQUESTRIAN CENTI   | ER. LLC                        |   |  |  |
| The new name must be distinguishable and end with th "L.L.C."                                |                                | y," the designation "LLC" or the abbreviation |  |  |
| B. If amending the registered agent and/or registered agent and/or the new registered office |                                | TALS Senter the name of the new               |  |  |
| Name of New Registered Agent:  |                                |   |  |  |
| New Registered Office Address:   |                                |   |  |  |
|  | (Enter 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, Stanature of New Registered Agent)

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HO 7000300791

## · HO7000-300721

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:

| itle               | <u>Name</u>                             | Address                           | Ty               | pe of Action  |
|--------------------|---|-----------------------------------|------------------|---------------|
| <del></del>        |   |                                   |                  | Add<br>Remove |
|                    |   |                                   |                  |               |
| ,                  |   |                                   | ··               | Add<br>Remove |
|                    |   |                                   |                  | Add<br>Remove |
| ·<br>              |   |                                   |                  | Add<br>Remove |
|                    | •                                       |                                   |                  | Add<br>Remove |
|                    |   |                                   |                  | Add<br>Remove |
| ). <b>If am</b> eu | ding any other information, enter chang | ge(6) here; (Attach additional s. |                  |               |
|                    |   |                                   |                  |               |
|                    |   |                                   | 2007<br>TALLA    |               |
| <br><br>           |   |                                   | CRETAR           |               |
| Dated              | Junifer M                               | astronardi                        | CRETAR) OF STATE |               |

ו פר מפני סביבר בנון

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