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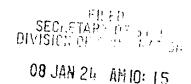
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EXAMINER

COVER LETTER

TO: Registration of Division of	on Section F Corporations	ų:
SUBJECT: H	(Name of Limited Liability Company)	
The enclosed Article	es of Amendment and fee(s) are submitted for filing.	
Please return all cor	respondence concerning this matter to the following:	
	CHARLES W. HAWLS (Name of Person)	
	(Firm/Company)	
	206 QUAYSIDE CR. #301 (Address)	
	MAITCAND EU. 32751 (City/State and Zip Code)	
For further informat	ion concerning this matter, please call:	
CHARLE	S W. HAWKS at (407) 599-9454 ame of Person) (Area Code & Daytime Telephone Number)	
(N	ame of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check	for the following amount:	
\$25.00 Filing Fe	e \$\int_{\text{\$30.00 Filing Fee & Certificate of Status}} \begin{array}{cccccccccccccccccccccccccccccccccccc	
V Re Di P.	AILING ADDRESS: STREET/COURIER ADDRESS: Registration Section vision of Corporations Division of Corporations Division of Corporations Clifton Building Illahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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** <u>Address</u> **Type of Action** Name 1 JOHN NUCCITELLI MGRM Remove Add Remove Add Remove $\neg Add$ Remove $\exists \mathsf{Add}$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) PRINCIPAL ADDRESS SHOULD BE: NOT ORLANDO MAITLAND MAILING ADDRESS SHOULD BE: NOT ORLANDO IS JAN Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00