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SECRETARY OF STATE
TAIL ANASSEE, FLORID

T. CLINE

MAR 17 2008

EXAMINER

COVER LETTER

TO: Registration Division of C	n Section Corporations	٠ - تعد		
SUBJECT: Coffee	e Pot Yacht Club, LLC			
• ,	(Name of Lin	nited Liability Company)		
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corre	spondence concerning this matte	r to the following:		
	Christopher C. Sano			
		(Name of Person)		
	Sanders Law Group	, P.A. (Firm/Company)		
	2958 1st Avenue No	orth		•
		(Address)		
	St. Petersburg, FL 3	33713		
		(City/State and Zip Code)	20 TA	
For further informatio	on concerning this matter, please of	call:	2000 MAR 14 AM 10: 49 SECRETARY OF STATE TALLAHASSEE. FLORID Telephone Number)	· 16 1
Christopher C. S		at (727) 328-7755	A SSE	8 [***]***
(Nar	ne of Person)	(Area Code & Daytime	Telephone Number)	No. of the last of
Enclosed is a check fo	or the following amount:		10° 49	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed))

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

Coffee Pot Yacht Club, LLC (Name of the Limited Li (A F)	ability Company as it now appears on our orida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liab Florida document number <u>L0800000633</u>	ility Company were filed on <u>January 3</u>	and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the o	designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office. Name of New Registered Agent:	registered office address on our reco e address here:	rds, enter the name of the new
New Registered Office Address:	(Enter Flori	ida street address)
-	(City)	, Florida(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

30

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 James K. Petrillo 527 14th Avenue NE Add St. Petersburg, FL 33701 Add Remove Add Remove Add Remove ∏Add Remove A'dd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 11 2008 Signature of a member or authorized representative of a member Christopher C. Sanders Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00