L0800001520

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EXAMINER

COVER LETTER

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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

SECRETARY OF STATE DIVISION OF CORPORATION

08 MAR -3 PM 12: 45

4 COM LLC (Name of the Limited Lia	bility Company as it now appears on our recorda Limited Liability Company)	ords.)
(A Flo	orida Limited Liability Company)	
The Articles of Organization for this Limited Liabil	lity Company were filed on 1-4-08	and assigned
Florida document number <u>L0800001520</u>	_ .	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	a limited lighility company here:	
A. If amending name, enter the new name of the	minted national company nere.	
The second secon	and 61 inited Linkille, Commun. 2 the desir	
The new name must be distinguishable and end with th "L.L.C."	e words Limited Liability Company, the design	gnation LLC or the addreviation
B. If amending the registered agent and/or i	rogistored office address on our records	enter the name of the new
registered agent and/or the new registered office	•	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida .	streat address)
	(Emer Florida)	street address)
_		orida
 -	(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, 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 Type of Action <u>Title</u> <u>Name</u> **Address** STEVE LEVEE 75 MALAKI PATH **✓** Add MGRM DALLAS GA 30132 Remove MGRM JOHN KNETTLES Add 4818 SE 11TH PLACE Remove MGRM_ MGRM THOMAS WINGERT 2051 GLENFIELD CROSSING CT Add ST.AUGUSTINE.FL Remove 32092 MGRM ARLINA KNETTLES **✓** Add PO BOX 1811 SILVER SPRINGS FL 34489 **TRemove** Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MGRM STEVE LEVEE IS TO BE OWNER AND THE OTHER 49% Dated 2.26.08 Typed or printed pame of signee

Page 2 of 2

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