L08000004452

62			
(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:			
L. SELLERS			
MAR 2 0 2008			
EXAMINER			

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03/19/08--01017--021 **25.00

SECRETARY OF STATE

FILED

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Exit_1	3, LLC		
SUBJECT: LAIL	(Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Joshua D. San		
		(Name of Person)	
	Exit 13, LLC		
		(Firm/Company)	
	DO D 502		
	PO Box 503	(Address)	
		, ,	
	Crystal Beach	, Fl 34681	
		(City/State and Zip Code)	
For further information c	onceming this matter, please c	all:	
Joshua D. Sa	ams	at (727) 744-90	87
	of Person)	(Area Code & Daytime 1	Telephone Number)
Enclosed is a check for th	ne following amount:		
∑ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55:00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & 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 Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Exit 13, LLC (Name of the Limited L) (A F	lability Company as it now appears on clouda Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liab	bility Company were filed on $1/14/08$	and assigned		
Florida document number <u>L08000004452</u>	.			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability company here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," t	he designation "LLC" or the abbreviation		
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, <u>enter the name of the nev</u>		
Name of New Registered Agent:				
New Registered Office Address:	(Enter F	(Enter Florida street address)		
	, Florida			
	(Ciŋ·)	(Zip Code)		
New Registered Agent's Signature, if changing Re	gistered Agent:			
I hereby accept the appointment as registered the provisions of all statutes relative to the pro- accept the obligations of my position as registe being filed to merely reflect a change in the re	oper and complete performance of my ered agent as provided for in Chapte	duties, and I am familiar with and r 608, F.S. Or, if this document is		

Page 1 of 2

company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

AHAR 19 PM 2:
Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGRM	STEIGER, H M	4575 DEAN MARTIN DR PANARAMA TOWERS II LAS VEGAS, NV 89103	Add Remove
MGRM_	STEIGER, H M	PO BOX 503 CRYSTAL BEACH, FL 34681	Add Remove
***************************************			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necess	sary.)
<u>-</u>			
_			200 TAL
Dated	March 13. 2		08 MAR 19 SECRETAR LLAHASS
		mber or authorized representative of a member SAMS, MGRM yped or printed name of signee	PH 2:
		Page 2 of 2	OO NTE RIDA

Filing Fee: \$25.00