LD8000006526

(Requestor's Name)					
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(City/State/Zip/Phone #)					
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SECREPARY OF STATE

COVER LETTER

Division of Corporations							
SUBJECT: Rainbow Coach LLC							
(Name of Limited Liability Company)							
The enclosed Articles of A	amendment and fee(s) are sub	omitted for filing.					
Please return all correspon	dence concerning this matter	to the following:					
	Frank P. Gifford III						
		(Name of Person)					
		(Firm/Company)					
	35 Bog Rd						
		(Address)					
	Mount Vernon, Maine 04	352					
(City/State and Zip Code)							
P 0 4 10 11		**					
For lurther information co	ncerning this matter, please c	all:					
Frank P. Gifford III		at (207) 332-1983					
(Name of Person) (Area Code & Daytime Telephone Number)							
Enclosed is a check for the	following amount:		_				
□ \$25.00 Filing Fee	2\$30.00 Filing Fee & Cortificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

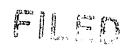
TO:

Registration Section

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



08 JUL -9 PM 12: 50

SECRETARY OF STATE
TALLAHASSEE FLORIDA

RAINBOW COACH, 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 Liz Florida document number L08000006526	ability Company	were filed on <u>01/18/2</u>	008 and assigned	
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and end with "L.L.C."	h the words "Limit	ed Liability Company,	' the designation "LLC" or the abbreviation	
Enter new principal offices address, if applica	able:	35 Bog Rd		
(Principal office address MUST BE A STREET ADDRESS)		Mount Vernon, Maine 04352		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/oregistered agent and/or the new registered office of New Registered Agent:	or registered off	:		
New Registered Office Address:	11830 NE 106			
		(Enter	Florida street address)	
	Archer		, Florida <u>32618</u>	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered the provisions of all statutes relative to the praccept the obligations of my position as registering filed to merely reflect a change in the recompany has been notified in writing of this control of the company has been notified in writing of this control of the control	d agent and agre roper and compl stered agent as p registered office o change.	ete performance of n rovided for in Chapt address, I hereby co	ny duties, and I am familiar with and ter 608, F.S. Or, if this document is	

Page 1 of 2

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Alley, Clifton H	39124 Heath Drive Zephyrhills, FL 33542 US	Add Remove
MGRM	Alley, Marion L	39124 Heath Drive Zephyrhills, FL 33542 US	Add Remove
MGRM_	Gifford, Frank P III	35 Bog Rd Mount Vernon, Maine 04352	Add Remove
MGRM	Gifford, Deborah J	35 Bog Rd Mount Vernon, Maine 04352	Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter o	change(s) here: (Attach additional sheets, if necessor	ary.)
			08 JUL -9 SECRETARY TALLAHASS
Dated May 28	Clifton H. C	elley	PH I2: 50
_		Ember of authorized representative of a member Alle 9 Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00