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(Red	questor's Name)	<del>-</del>
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02/11/08--01041--014 ++25.00

OR FEB 11 PH 4: 14

J. BRYAN

FEB 1 2 2008

**EXAMINER** 

## **COVER LETTER**

TO:	D: Registration Section Division of Corporations	
SUBJI	OBJECT: Tacked on the Tice, LLC (Name of Limited Liability Company)	
The en	ne enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please	ease return all correspondence concerning this matter to the following:	
	(Name of Person)	
	Sacked on the Sice, UC (Firm/Company)	O ON
	5250 Cypress Links Blud (Address)	OB FEB 11 PH 4: 14
	EIKton FL 32033 (City/State and Zip Code)	PH 4: 14
		I SKI
For fur	or further information concerning this matter, please call:    Company	
	sclosed is a check for the following amount:  \$25.00 Filing Fee \$ \$55.00 Filing Fee \$ \$60.00 Filing Fee,	
	Certificate of Status Certified Copy Certificate of State (additional copy is enclosed) Certified Copy (additional copy is	
	MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jacked or	, the Juice	LLC	
(Name of the Limited L (A F	iability Company as it now apper forida Limited Liability Company	ars on our records.)	<del></del>
The Articles of Organization for this Limited Liab		1/23/08	and assigned
This amendment is submitted to amend the follow	ving:		- 820
A. If amending name, enter the new name of t	he limited liability company h	e <u>re</u> :	PH 4: 14
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designation "LLC	or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the	name of the new
Name of New Registered Agent:	Carmen Out	rey	
New Registered Office Address:	SAME	Enter Florida street addre	ess)
		, Florida	
	(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** TOMMY R. O. Hey, Sr MGR MGR MGRM MGR Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) , <u>2008</u>. Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00