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(Requestor's Name)				
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(Cit	y/State/Zip/Phone	e #)		
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SECRETARY OF STATE
AND ANASSEF FI ORIDA

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: TENNESSEE TI	MBER AND CATTLE AV, LLC			
	(Name of Limited Liability Company)			
	·			
The enclosed Articles of Amendment	and fee(s) are submitted for filing.			
Please return all correspondence conce	erning this matter to the following:			
	and and an			
CARLO	OS AUGUSTO RODRIGUEZ, ESQUIRE			
	(Name of Person)			
CARLO	OS A. RODRIGUEZ, P.A.			
•	(Firm/Company)			
633 \$	SOUTH ANDREWS AVENUE, SUITE 203			
	(Address)			
FORT	LAUDERDALE, FL 33301			
	(City/State and Zip Code)			
For further information concerning this	matter, please call:			
CARLOS A. RODRIGUEZ	at (954) 463-4645			
(Name of Person) (Area Code & Daytime Telephone Number)				
•				
Enclosed is a check for the following a	mount:			
	iling Fee & S55.00 Filing Fee & S60.00 Filing Fee, cate of Status Certified Copy (additional copy is enclosed) 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

FILED

08 FEB -4 PM 1:51

SECRETARY OF STATE TALLAHASSEE FLORIDA

	MBER AND CATTLE A V, LLC the Limited Liability Company as it now appea	rs on our records.)	
	(A Florida Limited Liability Company)	,	
The Articles of Organization for the	s Limited Liability Company were filed on <u>Ja</u>	nuary 3, 2008 and assigned	
Florida document number LO	<u>30000 1271</u> .		
This amendment is submitted to an	end the following:		
A. If amending name, enter the r	ew name of the limited liability company her	<u>e</u> :	
The new name must be distinguishable "L.L.C."	e and end with the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation	
B. If amending the registered registered agent and/or the new r	agent and/or registered office address on c egistered office address here:	our records, enter the name of the new	
		• ,	
Name of New Registered	Agent:		
N- P ' 1005 4	•		
New Registered Office Ad		(Enter Florida street address)	
	`	(which I is the on our sales copy	
	(City)	, Florida	
New Registered Agent's Signature, i	changing Registered Agent:		
	s registered agent and agree to act in this ca ive to the proper and complete performance of		
accept the obligations of my posit	ion as registered agent as provided for in Ch nge in the registered office address, I hereby	apter 608, F.S. Or, if this document is	
,			
	(If Changing Registered Age	nt, 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

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGRM	David	Feltenberger	1411 SW 5th Avenue Okeechobee FL 34974	Add
				Add Remove
-	<u> </u>			Add Remove
	-	·		Add Remove
<u></u>	<u> </u>			Add Remove
				Add
D. If a	mending any other i	information, enter change	e(s) here: (Attach additional sheets, if necess	
				08 FEB -4 PH BECRETARY OF
• .				F STATE
Dated _	February 1	Signature of a member of	or authorized representative of a member	**************************************
	CARLOS A.	RODRIGUEZ		·
		Typed o	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00