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**EXAMINER** 

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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## **COVER LETTER**

Division of Corporation's			<b>b</b>	
CHID IE	CT.	All Supp	ly, LLC	
SUBJE			Limited Liability Company)	
The end	closed Articles of A	mendment and fee(s) ar	re submitted for filing.	
Please r	eturn all correspon-	dence concerning this m	natter to the following:	
		Bry	yan Snyder, Esq. (Name of Person)	
			(Name of Person)  Charles Licot, P.A.	
			(Firm/Company)	
		2240 E	Belleair Rd., Suite 190	
			(Address)	
	,	Clearn	uater, FL 33764	
			(City/State and Zip Code)	
For furt	her information cor	ncerning this matter, ple	ase call:	
	Bryan	Snyder, Esq.	at (727) 536-2100 (Area Code & Daytime Telephone Number)	
	(Name of	Person)	(Area Code & Daytime Telephone Number)	
Enclose	d is a check for the	following amount:		
<b>\$25.</b>	00 Filing Fee	\$30.00 Filing Fee & Certificate of State	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Registrat Division P.O. Box	NG ADDRESS: tion Section of Corporations (6327 see, 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**

	pply, LLC
(A Flor	bility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number	ity Company were filed on March 10, 2008 and assigned 8
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the	limited liability company here:
"L.L.C."	e words "Limited Liability Company," the designation "LLC" or the abbreviation egistered office address on our records, enter the name of the new address here:
Name of New Registered Agent:  New Registered Office Address:	
New Registered Office Address.	(Enter Florida street address)
	Florida
<del></del>	, Florida
	tered Agent:  Tent and agree to act in this capacity. I further agree to comply with er and complete performance of my duties, and I am familiar with and

(If Changing Registered Agent, Signature of New Registered

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 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 Address **Type of Action Title Name** Richard Peel Richard Alan Peel MGR MGR Angela Mary Peel XAdd Remove Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April 15, 2008. Signature of a member or authorized representative of a member Bryan Snyder Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00