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J. BRYAN SEP 3 0 2008 EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	(Name of Lim	Na(O ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	8 SEP
Please return all correspondent	ondence concerning this matter	to the following:	29
	Rech	Wd Petter (Name of Person)	OB SEP 29 PM 2: 59
		Shap IC (Firm/Company)	
	7050-		vel
	Danta	Beach, Ct. 3500 (City/State and Zip Code)	4
For further information of	concerning this matter, please c	all:	
Mitcheu 1 (Name	of Person)	at (<u>454) 922, 224</u> (Area Code & Daytime 1	Celephone Number)
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	- 58	CHOHS

ability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 4.1.2008 Florida document number 40000033298 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address)

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.

(City)

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 **Type of Action Address** Title Name Paul Roidoulis Add Remove 🗂 Add Remove Remove _ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 225 per or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00