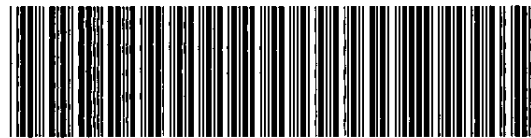


# L08000036894



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10/05/11--01022--004 \*\*25.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11 OCT -5 AM 11:54  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

K. SALY  
EXAMINER  
OCT 6 2011

Erin J. Shaw  
404.974.3484 direct  
eshaw@tpclg.com

October 4, 2011

Dear: Florida Department of Secretary of State

Enclosed please find the amendment and reinstatement documents for Ocean Sands Properties, LLC. *Please FedEx back the documents in prepaid FedEx.*

Please do not hesitate to contact me if you need anything at all. Thank you.

Best regards,

A handwritten signature in black ink that reads "Erin Shaw". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Erin Shaw

Assistant to Christopher T. Graham, Esq.

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Ocean Sands Properties, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Erin Shaw**  
Name of Person  
**The Private Client Law Group**  
Firm/Company  
**75 14th Street, Suite 2710**  
Address  
**Atlanta, GA 30309**  
City/State and Zip Code  
**eshaw@tpclg.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Erin Shaw** at ( **404** ) **974-3484**  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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**

FILED  
11 OCT -5 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ocean Sands Properties, 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 Liability Company were filed on 4/11/2008 and assigned  
Florida document number L08000036894.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Glass Sand Properties, LLC

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:**

75 14th Street

**(Principal office address MUST BE A STREET ADDRESS)**

Suite 2710

Atlanta, GA 30309

**Enter new mailing address, if applicable:**

75 14th Street

**(Mailing address MAY BE A POST OFFICE BOX)**

Suite 2710

Atlanta, GA 30309

**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*

\_\_\_\_\_, 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:

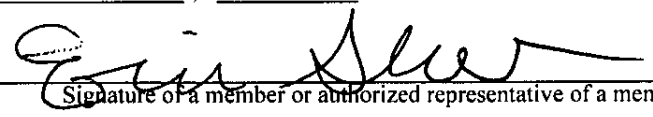
MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Erin Shaw

\_\_\_\_\_  
Typed or printed name of signee