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SECRETARY OF STATE,



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: FOCUS PARTNERS 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:
LYNN CLENN OR STEVE BRANDON  FOCUS PARTNERS, LLC  C/O BRANDON PARTNERS, ZNC.  Firm/Company  DOD PASAD ENA PLACE  Address  ORLANDO, PL 32-80 3  City/State and Zip Code  SEBRANDON @ BRANDON PARTNERS SALES  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (407) 835-9000 (3B) 800-616-6261
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Filing Fee & Solution Status Solution Status Solution Status Solution Status Solution Status Solution Status Solution Solution Status Solution Stat

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Focus PA	RTNERS, LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on out imited Liability Company)	r records.)	
The Articles of Organization for this Limited Liability Co. Florida document number	ompany were filed on\frac{\fin}}}{\frac{\fin}}}}}}{\frac}{\frac}}}}}}{\frac}}}}}{\frac{\frac{\frac{\frac{\frac{\fra	30/2008 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company here:		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," the	designation "LLC" the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	ESS)	757	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		EFLORIOP	
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		ords, enter the name of the new	
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 **Address** Type of Action **Title** Name PLUMBLINE INVESTORS 200 PASADENA PLACE XAdd

LLC' OFLANDO, FL 32-603 Remove STEPHEN E. BRANDON 1399 RICHMOND ROAD Add (DINTER PARK, FL 32789 TRemove RANDY J. HOLIHAW 1120 PALADZN COURT Add ORLANDO, FL 328/2 Remove MGRM KAREN BALCERAK 1607 GLENWICK DRIYEAdd
WINDERMERE FL34786 DREMOVE  $\square$ Add □ Remove ∏Add □Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00