

Division of Corporations

Page 1 of 1

**LD800053269**  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To: Division of Corporations  
 Fax Number : (850) 617-6383

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC  
 Account Number : I200700000020  
 Phone : (813) 435-3176  
 Fax Number : (813) 333-6358

**\*\*Enter the email address for this business entity to be used for the annual report mailings. Enter only one email address please.\*\***

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 TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 COREYCO, LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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D. BRUCE

JUN 14 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**COREYCO, 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 05/29/2008 and assigned  
Florida document number L08000053269.

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)

FILED  
10 JUN 11 AM 8:16  
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TALLAHASSEE, FLORIDA

**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:

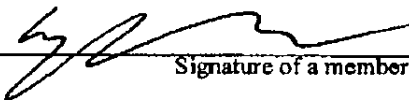
MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u>       | <u>Address</u>                                 | <u>Type of Action</u>  |
|--------------|-------------------|--|--|
| MGRM         | GREGORY L. MUNROE | 6253 CANDLEWOOD DR.<br>WESLEY CHAPEL, FL 33544 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGRM         | LESLIE MUNROE     | 6253 CANDLEWOOD DR.<br>WESLEY CHAPEL, FL 33544 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGR          | JOHN MUNROE       | 6253 CANDLEWOOD DR.<br>WESLEY CHAPEL, FL 33544 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                   |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

Dated 6-10-10, 2010



Signature of a member or authorized representative of a member

COREY MUNROE

Typed or printed name of signee

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