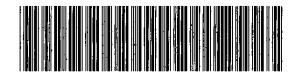
## L08000058185

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



100131395131

06/18/08--01043--007 \*\*55.00

SECRETARY OF STATEMS
SIVISION OF CORPORATIONS
08 JUN 18 AM 11: 39

J. BRYAN

JUN 1 9 2008

**EXAMINER** 

## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Division of Cor	porations			
suвjecт: <u>Straight</u>	t Street Investments (Name of Lim	ited Liability Company)	<del></del>	•
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	endence concerning this matter	to the following:		
	Karl M. McKenzie			
		(Name of Person)	08	15!AIG
		(Firm/Company)		DIVISION OF CORPORATIONS
	711 Climbing Oaks Cour	t		ORPO ST
	, .	(Address)		T: 3
	Winter Garden, FL 3478			<b>60</b> 55
		(City/State and Zip Code)		
For further information co	oncerning this matter, please c	all:		
Karl M. McKenzie		at (_407) 383-1387		
(Name o	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	ne 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 enc	
	ING ADDRESS:	STREET/COURIER Registration Section	ADDRESS:	

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

## · ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Straight Street Investments, 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 Compan Florida document number <u>L08000058185</u>	y were filed on June 12, 2008	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the design	nation "LLC" or the abbreviation	
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 or registered agent and/or the new registered office address he		enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
·	<del></del>	rida	
,	(City)	(Zip Code)	
New Registered Agent's Signature if changing Registered Agent	<b>f.</b>		

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>	Type of Action
MGRM	Wayne L. Scantling	7273 Branchtreee Dr. Orlando, FL 32835	Add Remove
MGRM_	Dzicdzice Washington	1219 Osprey Way Apopka, FL 32712	Add Remove
MGRM	Harold Goshe	8408 Sunsprite Court Orlando, FL 32818	Add Remove
MGRM	Carla Burton	1940 Portcastle Winter Garden, FL 34787	Add Remove
MGRM	Eric S. Fedrick Sr.	1837 Honeydew Court Ocoee, FL 34761	Add Remove
MGRM_	Sylvester Jennings	2444 Broken Elm Place Oviedo, FL 32766	AND DIVISION OF CRE I
	ding any other information, enter o	change(s) here: (Attach additional sheets, if necessar	N 18 AHII: 39
			—————————————————————————————————————
Dated	- Boul-	2008  McGlery  Tember or authorized representative of a member	
	Karl M. McKenzie	Typed or printed name of signer	·····

Page 2 of 2

Filing Fee: \$25.00