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GARY J. HAUSLER

GARY J. HAUSLER
(MEMBER OF FLORIDA, WASH D.C., & N.Y. BARS)

November 12, 2008

950 N. COLLIER BLVD. SUITE 421 THE SUNTRUST BUILDING MARCO ISLAND, FL 34145

Secretary of State
Corporations Division
Attention: Registration Section
P.O. Box 6327
Tallahassee, FL 32314

(239) 394-3172 FAX (239) 394-4172

Re: Articles of Amendment to Articles of Organization of Joe McKnight. LLC Document No. L08000060122.

Dear Sir:

Enclosed herewith please find original and one (1) copy of Cover Letter and Articles of Amendment to Articles of Organization of JOE MCKNIGHT, LLC, along with your fee of \$25.00.

Please proceed to file the enclosed original Articles of Amendment and return a copy of the filed Articles for my file.

Thank you for your anticipated cooperation.

Very truly yours

Gary J. Ha

GJH: ct Enclosures

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	JOE MO	CKNIGHT LLC	
	18 t t	ited Liability Company)	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		GARY J. HAUSLER	
		(Name of Person)	
		ATTORNEY AT LAW	
		(Firm/Company)	
	950 NOF	RTH COLLIER ROAD, SUITE 421	
		(Address)	
	MAR	CO ISLAND, FLORIDA 34145	
		(City/State and Zip Code)	
For further information	concerning this matter, please co	all:	
GARY J. HAUS	SLER, ATTORNEY AT LAW	at (239) 394-3172	
(Name	of Person)	(Area Code & Daytime T	elephone 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)
Regis Divisi P.O. I	tration Section on of Corporations Box 6327 nassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	JOE MCKN	IIGHT LLC			
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)		
The Articles of Organization for this Limited I Florida document numberL080000601		were filed on	JUNE 18, 2008	and assigne	:d
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	ility company he	ere:		
N/A					
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Comp	pany," the designation "L	LC" or the abbro	eviation
Enter new principal offices address, if appli	cable:	N/A			
(Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX)</u>	N/A			<u>—</u>
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	l/or registered of office address her N/A	ffice address on e:	our records, enter t	0 8	ie nev
New Registered Office Address:	N/A			₩	
THE TOURS OF THE THE TENTE OF T		(City)	Enter Florida street add	(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent	<u>.</u>		02 2	كوبيهما
				966 7	

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 almending 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

Title	Name	Address	Type of Action
MGRM	KURT'S POOL SERVICE,	INC 1241 FRUITLAND AVE PO BOX 2254 MARCO ISLAND, FL 34146	Add Remove
			 _
			Add Remove
***************************************			— 5
D. If an	nending any other information, en	ter change(s) here: (Attach additional sheets, if nec	essary.)
			O8 NOV
Dated	NOVEMBER 5	sigh A Mcfairlet	IT A
	Signature o	f a Member of authorized representative of a member JOSEPH ALBERT MCKNIGHT Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00