# 1080000100572

(Requestor's Name)
(Address)
(7.001000)
(Address)
(City/State/Zip/Phone #)
(Chip China) Zipin McMc ny
PICK-UP WAIT MAIL
(Duainnea Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:

Office Use Only



100131984281

07/09/08--01009--032 \*\*25.00



T. CLINE
JUL 1 0 2008
EXAMINER

# **COVER LETTER**

TO: Registration Sec Division of Corp					
SUBJECT:	Plant Str (Name of Limi	ted Liability Company)			
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	James	C. Kithrell (Name of Person)			
	Hunter Et	tarp Holdings (Firm/Company)		TO HE	crang***
•	311 Fast	Innings St.		JUL-9	\$
	Tallahasse	F/ 323 <sub>0</sub> (City/State and Zip Code)	)	#10: 10	# <sub>1</sub> ,,,
For further information co	oncerning this matter, please ca	all:		OPT O	
Chad (Name o	Kit+cell f Person)	at (850) 521 - 58 (Area Code & Daytime T	elephone Number)	<u> </u>	
Enclosed is a check for th	e 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 Certificate of Certified Co (additional of	of Status &	

### 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

Plant Stree	+ /- (	
(Name of the Limited Liability Co. (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L 080006057</u> .	pany were filed on $\frac{6/15/08}{2}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	1 1 1	TO COLUMN
2902 Plant St		"LLC" or the abbreviation
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company, the designation	SE SE
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida street	address)
	(Linei Pioriau Sireer	uuui css)
	, Florida	(Zip Code)
	[CHV]	(LIP COUE)

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member						
<u>Title</u>	<u>Name</u>	Address	Type of Action			
MGRM	James C. Kittrell	311 East Jennings St. Tallahassee, Fl 32301	Add Remove			
<u>MGRM</u>	Hunter & Harp Holdings Cl	C 3   East Jennings St. Tallahassee, Fl 3230)	Add Remove			
	·		Add Remove			
·			Add Remove			
			STAdd 9 Remove			
		·	Add O Remove			
D. If amendi	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary	v.)			
	1.1.2nd 20		<del></del>			
Dated/		or authorized representative of a member				
	//	Kitte \ br printed name of signee	<del></del>			

Page 2 of 2

Filing Fee: \$25.00