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SECRETATION OF STATE
TAIL ANASSEE, FLORIDA

J. BRYAN

AUG 1 0 2010

EXAMINER

COVER LETTER -

Division of Co	orporations ,		,	
SUBJECT: DOV	ich Ackerson	Investigation	NUC	
	Name of Limite	d Liabiny Company .	•	-
	•	*_************************************	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles o	of Amendment and fee(s) are subm	nitted for filing.		
Please return all corresp	ondence concerning this matter to	the following:	•	
	David F	Name of Person		TS: 1
	1 Brick 1tc	kersur fries	1-53/100	是 馬工
•	P.O. Box	461	·	ASSI ASSI
	Ellenton	Address FL 34222	<u>-</u>	PH 3: 20 PH 3: 20 PH 3: 20 PH STATE PE, FLORIDI
and the second	dave a- E-mail address: (to	City/State and Zip Code Ckersure Gmar be used for future annual export notifice	L. Can	
For further information	concerning this matter, please cal	<i>,</i> 1•		
Agre A	1 kerson	at(941) 209- (CV 63 Telephone Number	<u> </u>
Enclosed is a check for	the following amount:	Section 1	·	
\$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 Contact (additional of Certified Contact (additional of Certified C	of Status &
		•		

· TO: Registration Section

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

(Name of the Limited Liability Compar (A Florida Limited L	ny as it now	appears on o	ur fecords.)		•
. (A Florida Limited D	Audiniy Coll	ipaiiy <i>)</i>			
The Articles of Organization for this Limited Liability Company	were filed	on <u>2-</u> /	7-2010	2 and a	ssigned
Florida document number <u>LO800066905</u> .		,			
		,	•		
This amendment is submitted to amend the following:			. :		
		• • •	. :		
A. If amending name, enter the new name of the limited liab	ility compa	iny here:			
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability	Company," tl	ne designation	"LLC" or the	e abbreviati
	•		٠.		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)		· ·		A H	3
					g n
		S 11 1	• '	ASS	
Enter new mailing address, if applicable:	<u> </u>		٠٠٠ موست		o m
(Mailing address MAY BE A POST OFFICE BOX)			;	O:	
	,		,	20 A	က္
				A	Ö .
B. If amending the registered agent and/or registered of		ss on our re	cords, <u>ente</u> i	r the name	of the ne
registered agent and/or the new registered office address here	<u>e</u> :		•		•
Name of New Registered Agent:					
N Davids and OCC - Address		;			
New Registered Office Address:		Enter Fl	orida street a	ddress	
(•			Elamida		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 **Title** Name .. **Address** Type of Action □ Add Remove ☐ Add Remove ☐ Add ☐ Remove Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00