| (Red | questor's Name) | | |
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| (City | y/State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Na | me) | |
| (Document Number) | | | |
| Certified Copies | _ Certificate | s of Status | |
| Special Instructions to Filing Officer: | | | |
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K. SALY EXAMINER JUL 3 1 2012

COVER LETTER

TO:

Registration Section

| Division of Corporations | | | | |
|--|--|--|--|--|
| SUBJECT: | Richa | rd Baird LLC | | |
| | Name of Lim | ited Liability Company | | |
| The enclosed Articles | of Amendment and fee(s) are sul | omitted for filing. | | |
| Please return all corre | spondence concerning this matter | to the following: | | |
| | | Richard A. Baird | | |
| | | Name of Person | | |
| | | Richard Baird LLC | | |
| | | Firm/Company | | |
| | | 50 Laurel Oak Court | | |
| | | Address | | |
| | P | alm Harbor, FL 34683 | | |
| | | City/State and Zip Code | | |
| | E-mail address: (| to be used for future annual report notifica | tion) | |
| For further informatio | n concerning this matter, please of | call: | | |
| Richard Baird | | at (_727_) 78 | 86-7297 | |
| Nam | e of Person | Area Code & Daytime T | elephone Number | |
| Enclosed is a check for | or 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) | |
| MAILING ADDRESS: Registration Section | | STREET/COURIEI Registration Section | | |
| Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Division of Corporations Clifton Building 2661 Executive Center Circle | | |

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| FILED |
|--------------------|
| 12 JUL 30 PM 2 |
| SECOLARIA DE SILVE |

Zip Code

| Richard Baird LLC | PALLAND OF SIGHE |
|---|---|
| (Name of the Limited Liability Compar (A Florida Limited L | iability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number <u>LO 800009 3748</u> . | were filed on $9-30-2008$ and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liab | ility company here: |
| The new name must be distinguishable and end with the words "Limit | |
| The new name must be distinguishable and end with the words "Limit" L.L.C." | ted Liability Company," the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | nla |
| (Principal office address MUST BE A STREET ADDRESS) | |
| | |
| Enter new mailing address, if applicable: | nja |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here | |
| | |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| | , Florida |

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 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 <u>Address</u> **Type of Action MGRM** Christopher Austin 7730 Wicklow Street ✓ Add New Port Richey, FL 34653 Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 26 2012 Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Mr. Richard A. Baird
Typed or printed name of signee