108000093824

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2009 JUL 27 PM 2: 35 SECRETARY OF STATE ALLAHASSEE, FLORID,

FILED

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	ON DEMAN	D RETAILING LLC			
		ited Liability Company			
	f Amendment and fee(s) are sulpondence concerning this matter	-		SECRETARY TALLAHASSE	Sing Sing
	MARLA C ESTY, REGISTERED AGENT Name of Person			100 PE	ר ר
	ABC LLC d/b/a EA	SY TAX AND ACCOUNT Firm/Company	ING SERVICE	2: 35 STATE ORIDA	•
		P O BOX 2066 Address			
	HIG	SH SPRINGS, FL 32655			
	E-mail address: (City/State and Zip Code sytax@windstream.net to be used for future annual report no	tification)		
For further information	concerning this matter, please of	·	,		
MARLA	COPELAND ESTY	at (_ 386)	454-8959		
Name	of Person	Area Code & Dayt	ime Telephone Numbe	r	
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 enclos	ed) Certified	ite of Status &	osed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive of Tallahassee, FL	orations Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ON DEMAND RETAILING LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) 10/03/2008 The Articles of Organization for this Limited Liability Company were filed on ____ and assigned L08000093824 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "L.L.C." 1208 VALLEY FORGE BLVD Enter new principal offices address, if applicable: SUN CITY CENTER, FL 33573 (Principal office address MUST BE A STREET ADDRESS) 1208 VALLEY FORGE BLVD Enter new mailing address, if applicable: SUN CITY CENTER, FL 33573 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BLALOCK, SHAYLA R	3223 NW 142ND AVE GAINESVILLE, FL 32609	Add Remove
			Add Remove
			Add Remove
		<u> </u>	S. C. And
		S. E. E. S.	
		DA	Add Remove
D. If a	mending any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
	CHANGE TO ADDRESS OF SOLE	MEMBER:	
	FARREL, RALPH S		
	1208 VALLEY FORGE BLVD		
	SUN CITY CENTER, FL, 33573		
Dated _	JULY 24 , 20	09	_
	March	R. Blalock	
	Signature of a member	or authorized representative of a member	
		AYLA R BLALOCK or printed name of signee	
	1 yped	or britted traine or signee	

Page 2 of 2

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