## L08000099870

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

T. HAMPTON

NOV 2 5 2008

EXAMINER

## **COVER LETTER**

Division of Cor	porations		
SUBJECT: DESOT	O VENTURES, LLC		
30B3LC1.		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Douglas A. Peebles,		
		(Name of Person)	
	Peebles & Moriarty,	P.A.	
		(Firm/Company)	
	1111 3rd Avenue W	., Suite 210	
		(Address)	
Some a new	. Bradenton, Florida 3	4205	
		(City/State and Zip Code)	3.77 H 3.77 F 3
For further information c	oncerning this matter, please c	all: * · · · · · · · · · · · · · · · · · ·	
Douglas A. Peebles, Esq.		at (941_) 744-0075	
(Name of Person)		(Area Code & Daytime Telephone Number)	
Enclosed is a check for the	ne following amount:		
2 \$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:

TO:

**Registration Section** 

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

DESOTO VENTURES, LLC			
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) Limited Liability Company)		
The Articles of Organization for this Limited Liability C Florida document number <u>L08000099870</u>	Company were filed on 10/23/08	_ and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company here:		
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Company," the designation "LLC	C" or the abbreviation	
Enter new principal offices address, if applicable:	TALLA ALLA		
(Principal office address MUST BE A STREET ADDR	Ers 3		
Enter new mailing address, if applicable:	で で で で で で で で で で で で で で で で で で で	2 III	
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>	
B. If amending the registered agent and/or regist registered agent and/or the new registered office additional Name of New Registered Agent:			
New Registered Office Address:	(Enter Florida street address)		
	, Florida		
	(City)	(Zin Code)	

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 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> Name **Address** Type of Action 1158 S. Haberland Blvd. JC BROWN, LLC MGRM **⊠** Add North Port, FL 34288 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.) Dated November 20th Signature of a member or authorized representative of a member Paul Hoover, Member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00