## L08000104391

(Requestor's Name)			
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PICK-UP WAIT MAIL			
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2009 OCT 30 PM 3: 23
SECRETARY OF STATE

C. LEWIS

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**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 23, 2009

STEVE MASON JACK COLLINS RENTALS 20001 GULF BLVD., STE. 8 INDIAN SHORES, FL 33785

SUBJECT: STEPHEN MASON, LLC

Ref. Number: L08000104391

We have received your document for STEPHEN MASON, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 309A00033793

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2009 OCT 30 PM 3: 23

	£000 m
Stephen Mason, LLC	SECRETARY OF STATE TALLAHASSEE, FLORIDA v as it now appears on our records. ability Company)
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company	
Florida document number <u>L08000104391</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
Stephen F. MASON LLC The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offi 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.

If Changing Registered Agent, Signature of New Registered Agent

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 = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
<u></u>			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen 5½	ephen F. Mason LL KACK Collins Ren	change(s) here: (Attach additional sheets, if necess  Show lol own  HAIS.	ary.)
Dated	Maron	ember or authorized representative of a member	TALLAHASS
	STEPHON FM ASON	Typed or printed name of signee	PH 3: 23 SEE, FLORIG
		Page 2 of 2	NO 23

Filing Fee: \$25.00