

LO80000105075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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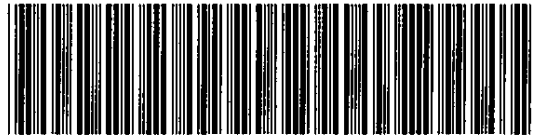
Special Instructions to Filing Officer:

L. SELLERS

DEC 23 2008

EXAMINER

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12/22/08--01049--001 \*\*60.00

STATE  
TALLAHASSEE FLORIDA

08 DEC 22 AM 8:05

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Knot on Main Street, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara L. O'Connell  
(Name of Person)

Knot on Main Street, LLC  
(Firm/Company)

2428 Bayshore Blvd.  
(Address)

Dunedin, FL 34698  
(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara L. O'Connell at ( 727 ) 734-4597  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|---|

**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**

Knot on Main Street, LLC

**(Name of the Limited Liability Company as it now appears on our records.)**  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/12/08 and assigned  
Florida document number L08000105075.

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 "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

2428 Bayshore Blvd.

**(Principal office address MUST BE A STREET ADDRESS)**

Dunedin, FL 34698

**Enter new mailing address, if applicable:**

**(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:

Barbara L. O'Connell

New Registered Office Address:

2428 Bayshore Blvd.

*(Enter Florida street address):*

Dunedin

*(City)*

Florida 34698

*(Zip 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.*

Barbara L. O'Connell

**(If Changing Registered Agent, Signature of New Registered Agent)**

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08 DEC 22 AM 05  
STATE OF FLORIDA  
TALLAHASSEE

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

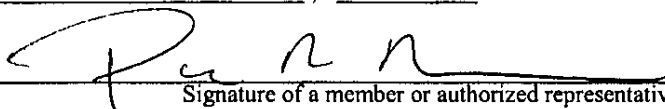
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Barbara L. O'Connell	2456 Baywood Drive West Dunedin, FL 34698	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Robert E. O'Connell	2456 Baywood Drive West Dunedin, FL 34698	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Paul Ray Auman	2451 Baywood Drive West Dunedin, FL 34698	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Karen O'Connell Auman	2451 Baywood Drive West Dunedin, FL 34698	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated December 19th, 2008

  
Signature of a member or authorized representative of a member

PAUL RAY AUMAN

Typed or printed name of signee

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STATE  
TALLAHASSEE FLORIDA