(Requestor's Name) (Address)	400177552044
(City/State/Zip/Phone #)	04/26/1001061003 **30.00
(Document Number)	FILED 2010 APR 26 PH 12: 29 SECRETARY OF STATE TALLAHASSEE. FLORIDA
	T. CLINE APR 2 7 2010 EXAMINER

		COVER LETTER	,
TO: Registration S Division of Co			•
SUBJECT:		nitten, LLC	
	f Amendment and fee(s) are su bondence concerning this matte	-	
	·	Smith Sinrod Name of Person	
		By Smith, LLC Firm/Company	
		4380 Devereux Dríve Address	
		Pensacola, FL 32504 City/State and Zip Code Description Com (to be used for future annual report notification)	2010 APR SECRET
For further information	concerning this matter, please	call:	26 SSE
	eed Williams of Person	at ( <u>205)</u> 52 Area Code & Daytime Te	9-6211 PH 29
Enclosed is a check for	the following amount: \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisi P.O. F	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

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## **ARTICLES OF AMENDMENT** TO ARTICLES OF ORGANIZATION OF

# Smitten, 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 \_\_\_\_\_ 12/11/2008. and assigned Florida document number <u>L08000113532</u>

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

the	words	"Limite	d Liability	Company,'	't

The new name must be distinguishable and end with t the designation "LLC" or the abbreviation "L.L.C."

By Smith, LLC

#### 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)

4380 Devereux Drive	
Pensacola, FL 32504	TA 201
	LCR AF
4380 Devereux Drive	R 26 F
Pensacola, FL 32504	F. F. D
	ORI 2

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:	Allison Sinrod		
New Registered Office Address:	4380 Devereux Drive		
	Ente	r Florida street addr	ess
	Pensacola	, Florida	32504
	City		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, E.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm/hat 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 = Manager MGRM = Managing Member

Title	Name	Address	<b>Type of Action</b>
MGRM	Smith Sinrod	4380 Devereux Drive Pensacola, FL 32504	Add Remove
	<u></u>		Add Remove
	,,,,,,		Add Remove
			Add Remove
	• <u>••</u> •••••••••••••••••••••••••••••••••	TALLAHASSEE F	PRemove
		FLORIDA	RS () Add Remove

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

	LLC Name Change ONLY
ed	April 220d, 2010.
	Swith Simod
nted	April 2201, 2010. Signature of a member or authorized representative of a member Signature of a member or authorized representative of a member Smith Sinrod Typed or printed name of signee

Page 2 of 2