08000114724

	(Requestor's Name)		
	(Address)		
	(Address)		
	(City/State/Zip/Phone #	<i>t</i>)	
PICK-UI	P WAIT	MAIL	
	(Business Entity Name)	
	(Document Number)		
Certified Copies	Certificates o	of Status	
Special Instructions	s to Filing Officer:		
JAN 1 1 2013 L. SELLERS			

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12/19/12--01021--009 **55.00

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COVER LETTER

TO:

Registration Section
Division of Corporations

SHR IFCT.

Grutland 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:

Kevin Rule

Name of Person

Fiduciary Support Services Ltd.

Firm/Company

6 Dickinson Dr. Ste. 218

Address

Chadds Ford, PA 19317

City/State and Zip Code

krule@fiduciarysupport.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Rule

610,765-6008

Name of Person

Area Code & Daytime Telephone Number

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 enclosed)

□\$60.00 Filing Fee, Certificate of Status & Certified Copy (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



December 20, 2012

KEVIN RULE FIDUCIARY SUPPORT SERVICES LTD 6 DICKINSON DRIVE, STE. 218 CHADDS FORD, PA 19317

SUBJECT: GRUTLAND LLC Ref. Number: L08000114724

We have received your document for GRUTLAND LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return 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) 245-6051.

Leslie Sellers Regulatory Specialist II

Letter Number: 212A00030124

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Grutland LLC				
(<u>Name of the Limited</u> (A	Liability Compan Florida Limited Li	y as it now appears on or ability Company)	ur records.	
The Articles of Organization for this Limited L. Florida document number		were filed on <u>12/16/20</u>	800	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, <u>enter the new name o</u>	f the limited liabi	lity company here:		
The new name must be distinguishable and end wi L.L.C." Enter new principal offices address, if applic		ed Liability Company," th	e designation	n "LLC" or the abbreviation
Principal office address MUST BE A STREE				
Enter new mailing address, if applicable:		6 Dickinson Dr.		
Mailing address MAY BE A POST OFFICE BOX)		Ste. 218	» -	
		Chadds Ford, PA	19317	
B. If amending the registered agent and/ registered agent and/or the new registered o Name of New Registered Agent:	ffice address her		ecords, <u>ent</u>	er the name of the new
	239 E. Virgi	nia St.		
New Registered Office Address:	Enter Florida street address			
	Tallahasse	е	, Florida	32301
		City		Zip Code
	n 1414			

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 = Manager MGRM = Managing Member

Title MGR	Mark Marinzoli	Address 6 Dickinson Dr. Ste. 218 Chadds Ford, PA 19317	Type of Action Add Remove
			_ Add _ Remove
			_ Add
			Add
			Add Remove
			Add Remove

lf amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
_{ed} De	cember 17th 2012
4	Signature of a member or authorized representative of a member
	Mark Mannzoli
	Typed or printed name of signee

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Filing Fee: \$25.00