## L0900005929

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DEFAILMENT OF STATE DIVISION OF CORPORATION TALLAHASSEF, FLORIDA RECEIVED

10 NOV 19 PM 3: 11

SECRETARY OF STATE
VISION OF CORPORATION:

N. Culligan NOV 1 9 2010

## **COVER LETTER**

TO:	Registration Section Division of Corporations	•	,	
SUBJE	JECT: Southerr	Hospitality Magazine LLC	•	
	/ D D T T T T T T T T T T T T T T T T T	e of Limited Liability Company		
The end	enclosed Articles of Amendment and fee(	s) are submitted for filing.		
Please	e return all correspondence concerning th	is matter to the following:		
		David A Dewell		
		Name of Person		
Great Minds, Inc				
Firm/Company				
		8275 Hunters Ridge Trl		
		Address		
		Tallahasseee, FL 32312		
	david@greatmindsinc.com  E-mail address: (to be used for future annual report notification)			
For fur	urther information concerning this matter,	please call:	•	
David A Dewell		at ( 850 )	386-7401	
	Name of Person	Area Code & Daytim	e Telephone Number .	
Enclose	sed is a check for the following amount:			
<b>₹</b> ] <b>\$2</b> 5.	5.00 Filing Fee \$30.00 Filing Fe Certificate of S		\$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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

Zip Code

10 NOV 19 PM 3: 11 Southern Hospitality Magazine, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 01/20/2009 The Articles of Organization for this Limited Liability Company were filed on and assigned L09000005929 Florida document number \_\_\_ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Southern Hospitality Magazine Professional, LLC 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: (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 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: 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type	of Action
MGR	Debbie Dewell	8275 Hunters Ridge Trl Tallahassee, FL 32312	Ad Re	
MGR	David Dewell	8275 Hunters Ridge Trl Tallahassee, FL 32312	Ad	
MGR	Great Minds, Inc	8275 Hunters Ridge Trl Tallahassee, FL 32312	✓ Add Remove	
MGRM	Debbie Dewell	8275 Hunters Ridge Trl Tallahassee, FL 32312	Add Remove	
MGRM	David Dewell	8275 Hunters Ridge Trl Tallahassee, FL 32312	[∕]Add Ren	
			Add	
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)		
			10 NOV 19	SECRETARY DIVISION OF C
Dated	November 18 ,	2010	- PH 3: IT	EU 196 STATE 9RPOKATION:
	Signature of a n	nember or authorized representative of a member	<del></del>	
		David A Dewell Typed or printed name of signee		
1		- 1 ham or himmen memo or premon		

Page 2 of 2

Filing Fee: \$25.00