

LP000014500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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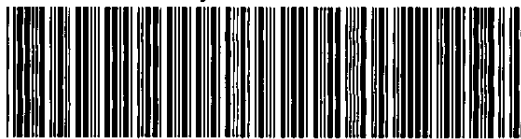
(Business Entity Name)

(Document Number)

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09 JUL 17 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JUL 20 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Cutting Room 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:

Joe McDorman

Name of Person

The Cutting Room LLC

Firm/Company

4591 Highway 20 East, #205

Address

Niceville, FL 32578

City/State and Zip Code

joesr@mcdorman-construction.com

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

For further information concerning this matter, please call:

Joe McDorman

Name of Person

at (850)

897-4343

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

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 12, 2009

JOE MCDORMAN
4565 COMMERCIAL DRIVE, #101
NICEVILLE, FL 32578

SUBJECT: THE CUTTING ROOM LLC
Ref. Number: L09000014500

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for THE CUTTING ROOM LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 409A00016072

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

The Cutting Room 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 February 12, 2009 and assigned Florida document number L09000014500.

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:

4591 Highway 20 East, #205

(Principal office address MUST BE A STREET ADDRESS)

Niceville, FL 32578

Enter new mailing address, if applicable:

4591 Highway 20 East, #205

(Mailing address MAY BE A POST OFFICE BOX)

Niceville, FL 32578

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TALLAHASSEE, FLORIDA

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:

Michael W McDorman

New Registered Office Address:

4591 Highway 20 East, #201

Enter Florida street address

Niceville

, Florida

32578

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, 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.

Michael W McDorman
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

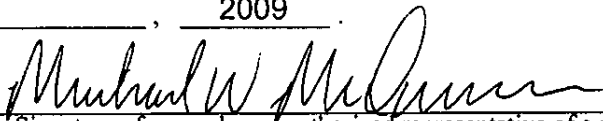
| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------------|-----------------------------|--|
| MGRM | McDorman Holdings LLC | 4565 Commercial Drive, #101 | <input type="checkbox"/> Add |
| | | Niceville, FL 32578 | <input checked="" type="checkbox"/> Remove |
| MGRM | Lisa D McDorman | 4591 Highway 20 East, #101 | <input checked="" type="checkbox"/> Add |
| | | Niceville, FL 32578 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

McDorman Holdings LLC is no longer associated with The Cutting Room LLC

Lisa D McDorman is a new member of The Cutting Room LLC

Dated July 14, 2009



Signature of a member or authorized representative of a member

Michael W McDorman

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA