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G. MCLEOD

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EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 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:
Ben Golden Name of Person
Howell, Stepher, & Golden
1122 Ploida Ave
City/State and Zip Code benge woodgy. net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Per Good at (850) 215-3093 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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 & The Articles of Organization for this Limited Liability Company were filed on Florida document number _O90000 \9950 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: (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 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.

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 of Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title Name Address Type of Action

MGRM Virginia C Walters 1122 Florida Ave Add Remove

MGRM Steven R Robinson 1122 Florida Ave Add Remove

MGRM Steven R Robinson 1122 Florida Ave Add Remove

Add Remove

Remove

∏Add _∏Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	6/5/09
	Jul Ewall
	Signature of a member or authorized representative of a member
	Leonard & walters Ir Typed or printed name of signee
	Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00