## 1090000 30595

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(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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D. BRUCE

FEB 28 2011

**EXAMINER** 

## **COVER LETTER**

	ration Section on of Corporations			
SUBJECT:	Revolutions	Technologies, L.L.C		
,	Name of Li	mited Liability Company		
	ticles of Amendment and fee(s) are s	_		
Please return all	correspondence concerning this mat	ter to the following:		
		Jeremy Lawson		
	•	Name of Person		
	C.			
Revolutions Technologies, L.L.C.				
	8115 Cosica Blvd			
		Address		
		Navarre, FL 32566 City/State and Zip Code		
	jerei	jeremy.revolutions@gmail.com  E-mail address: (to be used for future annual report notification)		
For further infor	mation concerning this matter, please	•	nonneanon)	FILE FEB 25 RM KETARY OF S AHASSEE, FL
	Jeremy Lawson	at ( 850 )	686-5335	ILE 825 RM TARY OF CASSEE, FL
	Name of Person		aytime Telephone Number	OF STATE EE, FLORIDA
Enclosed is a che	eck for the following amount:	•		<b>A</b>
25.00 Filing	Fee \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	losed) Certified (	e of Status &

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

Revolutions Tech	nnologies, L.I	L.C.	
(Name of the Limited Liability Compa (A Florida Limited)	i <b>ny as it now appe</b> a Liability Company)	irs on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	March 27, 2009	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	8115 Cosica	Blvd	
(Principal office address MUST BE A STREET ADDRESS)	Navarre, FL	32566	transf.
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>
			新聞出
Enter new mailing address, if applicable:	8115 Cosica	Blvd	25 SSE SSE
(Mailing address MAY BE A POST OFFICE BOX)	Navarre, FL	32566	
·			25
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ei	nter Florida street addr	ess
***************************************		, Florida	
	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 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>	Type of Action
MGRM	Keith Hixon	7150 Roadside Road Pensacola, FL 32526	Add Remove
			Add Remove
<del></del>			Add Remove
<del></del>			Add Remove
	<del></del>		Add Remove
			Add Remove
D. If amend	ling any other information, enter o	change(s) here: (Attach additional sheets, if necessor	IAL
			TIL
Dated	February 21 ,	2011 .	TED SALE
	Signature of a mo	ember or authorized representative of a member  Jeremy Lawson  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00