L09000039379

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B. KOHR
AUG 2 6 2009
EXAMINER

COVER LETTER

TO: Regis Divis	stration Section of Cor	ction porations	. ,		
SUBJECT: _		Tou	rtelot, LLC	pr.	
Jeboke I.			ited Liability Company		
		Amendment and fee(s) are subndence concerning this matter	-	OS ALG 24	
			William C. Tourtelot Name of Person	Alle 24 PM	
			Tourtelot, LLC Firm/Company		
			390 4th Street N	·	
		St	. Petersburg, FL 33701		
		billt	City/State and Zip Code @tourtelotbrothers.com		
For further inf	ormation c	n-mail address: (to be used for future annual report notific call:	ation)	
John Schnackel, Attorney Name of Person			at (813) 639-7685 Area Code & Daytime Telephone Number		
Enclosed is a	check for th	ne following amount:			
\$25.00 Fili	ing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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		ation Section n of Corporations ex 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

TOURTELOT, LLC (Name of the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company)

OF

The Articles of Organization for this Limited Liability Company were filed on ____ L09000039379 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: 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

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** <u>Name</u> Address **Type of Action** MGR Debra Ogle 390 4th Street N ✓ Add St. Petersburg, FL 33701 Remove ☐ Add Remove ☐ Add Remove Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 19 2009 Dated ___ Signature of a member or authorized representative of a member William C. Tourtelot Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00