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11 MAY TO AM II: 27
SECREPAND OF STATE

B. BOSTICK

MAY 11 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Division of	n Section Corporations		
SUBJECT:	LCM	1 Pasco, LLC	
		nited Liability Company	
	s of Amendment and fee(s) are su	-	
Please return all corre	espondence concerning this matte	er to the following:	
	<u></u>	Suzanne Petrovich	
		Name of Person	
		LCM Pasco, LLC	
		Firm/Company	
	110	01 East Fletcher Avenue	
		Address	A Section 1
		Tampa, FL 33612	AHASS 10
		City/State and Zip Code	SO
	spetrov	rich@morganautogroup.com (to be used for future annual report notificatio	11,
For further information	e-mail address: on concerning this matter, please		n) AN III 2
_		200	5 7
	uzanne Petrovich	at ( 813 ) 936  Area Code & Daytime Tele	3-3125 ephone Number
Enclosed is a check for	or the following amount:		
\$25.00 Filing Fee	\$30.00 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)
Reg Div P.O	AILING ADDRESS: gistration Section rision of Corporations D. Box 6327 lahassee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

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

	l Pasco, LLC		
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appe mited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Co	mpany were filed on	June 23, 2009	and assigned
Florida document numberL0900061200	<u>-</u> ·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limit</u>	ed liability company he	ere:	
The new name must be distinguishable and end with the words L.L.C."	s "Limited Liability Comp	pany," the designation "LI	.C" or the abbreviatio
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRE	<u> </u>	_i	
Enter new mailing address, if applicable:		- - - -	
Mailing address MAY BE A POST OFFICE BOX)			
3. If amending the registered agent and/or register egistered agent and/or the new registered office addre		our records, enter th	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	E	nter Florida street addr	ess
·	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered	•		LIP COUR

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 ' Type of Action Name Address MGR Morgan Land Trust ☐ Add
✓ Remove 1101 East Fletcher Avenue Tampa Fl 33612 L&B Enterprises Southeast LLLP MGR 1101 East Fletcher Avnue **✓** Add Tampa FL 33612 ☐ Remove · □ Add ☐ Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

Larry C Morgan

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00