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J. BRYAN

AUG -4 2011

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJI	Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Denise D. Key Name of Person
	EBUYZ, LIC
	St. Augustine Pl 32084
	, crystalla and 219 cour
	E-mail address: (100se used for future annual report notification)
For fur	ther information concerning this matter, please call:
	Dewise Key at 904, 460-2022  Name of Person Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:
<b>1</b> \$25	.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\text{\$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

## 'ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EBU42	2. UC		
(Name of the Limited Liability Compan (A Florida Limited Liability Compan)	y ás it now appe	ars on our records.)	
The Articles of Organization for this Limited Liability Company v Florida document number	were filed on	07/13/2009	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company h	ere:	
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Com	pany," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:			超声力
(Principal office address MUST BE A STREET ADDRESS)			SS THE
Enter new mailing address, if applicable:			E.F. F.
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		our records, enter	the name of the new
Name of New Registered Agent:			, p
New Registered Office Address:	E	nter Florida street ad	dress
	***. • I		
	City	, Florida	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 or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action			
Associate Member	- Douglas A Key	2401 N. Ponke de les BIVd. St. Augustive, Pc 32084 ess FOR Denise D. Key reflect the address of:	Add Remove			
	Please update addr. AS MGRM TO	ess for Denise D. Key reflect the address of: 2401 N. Ponce de Lean Blud. Str Angustine, Pr 32084	Add Remove			
			Add Remove			
			A A Remove			
			Danaya :			
			— Padd			
D. If amond	ling any other information, enter shapes	(Attach additional shoots if pages and	Remove			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  The Joderal Joy To# 26-327634 is mo						
<u></u>	ongy correct; cl w	as not aware the acco	untant			
_h _9	ad applied for a me	en not aware the acce wer #27-0544108 when nide. Please update nec of FORM FROM IRS)	ue cords.			
·	Shank lyou. (attache	d FORM FROM IRS)	<del></del>			
Dated	ly 20, 20	ell.				
		or authorized representative of a member	<u>.</u>			
Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00