Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 Phone

: (800)494-3124

Fax Number

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:			
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LIME CACTUS LLC

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ARTICLES OF AMENDMENT 16 AM 8: 17 TO ARTICLES OF ORGANIZATION OF

	LIME CACTUS LLC		
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Company	cars on our records.)	
The Articles of Organization for this Limited Florida document number	·	07/30/2009	and assigned
This amendment is submitted to amend the f	following:		
A. If amending name, enter the new nam	e of the limited liability company l	<u>iere</u> :	
The new name must be distinguishable and end "L.L.C."	with the words "Limited Liability Con	npany," the designation	"LLC" or the abbreviatio
Enter new principal offices address, if app	plicable:		
(Principal office address MUST BE A STR	EET ADDRESS))	
Enter new mailing address, if applicable:			
(Muiling address MAY BE A POST OFFIC	CE BOX)	V	
B. If amending the registered agent an registered agent and/or the new registered		our records, <u>enter</u>	the name of the nev
Name of New Registered Agent:			
New Registered Office Address:		(Enter Florida street a	ddress)
	(City)	, Florida _	(Zip Code)
	11.1171		LEID COUCI

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, ahd 600025656463Manager or Managing Member being added or removed from our records:

MGR ≃ MGRM	: Manager I = Managing Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	GERALD GENNA	B60 EMERSON DRIVE PALM BAY, FLORIDA 32907	Add Remove
			Add Remove
	_		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If an	nending any other information, enter o	change(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE DIVISION OF CORPORATION OF CORPO
Dated	December 16	2010 . Change in the control of a member	
		Gerald Genna Typed or printed name of signee	