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| 'n | (Requestor's Name) |
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| PICK-U | P WAIT MAIL |
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SECRETARY OF STATE DIVISION OF CORPORATION

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G. MCLEOD

SEP 17 2009

EXAMINER

COVER LETTER

Ι,

TO:

| | on Section f Corporations | |
|----------------------------|--|---|
| SUBJECT: | Suwannee Marina Enterprises, LLC | |
| 3000ECT. | Name of Limited Liability Company | |
| The enclosed Artic | es of Amendment and fee(s) are submitted for filing. | |
| Please return all co | rrespondence concerning this matter to the following: | |
| | Theodore M. Burt, Esq. Name of Person | |
| | Theodore M. Burt, P.A. Firm/Company | |
| | Post Office Box 308 Address | |
| | Trenton, Florida 32693 | |
| | City/State and Zip Code burt@svic.net E-mail address: (to be used for future annual report notification) | |
| For further informa | tion concerning this matter, please call: | |
| N 1, | Theodore M. Burtat (_352_)463-2348 | |
| N | lame of Person Area Code & Daytime Telephone Number | |
| Enclosed is a check | for the following amount: | |
| []\$25.00 Filing F | Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) |) |
| F C F | AAILING ADDRESS: Registration Section Division of Corporations O. Box 6327 Callahassee, FL 32314 Callahassee, FL 32314 Callahassee, FL 32301 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Suwannee | Marina Enterprises, | LLC | | |
|--|-------------------------------|-----------------------------|----------------|---------------|
| (<u>Name of the Limited Liabili</u> (A Florida | Limited Liability Company) | rs on our records.) | | |
| The Articles of Organization for this Limited Liability | Company were filed on | 8/10/2009 | and as | signed |
| Florida document number L0900076761 | · | | | |
| This amendment is submitted to amend the following: | | • | | |
| A. If amending name, enter the new name of the lir | nited liability company he | <u>re</u> : | | |
| The new name must be distinguishable and end with the w 'L.L.C." | ords "Limited Liability Compa | any," the designation "L | LC" or the | abbreviatio |
| Enter new principal offices address, if applicable: | **** | | | |
| (Principal office address MUST BE A STREET ADE | ORESS) | | | <u> </u> |
| | | | <u> </u> | <u>- \$\$</u> |
| | | | - | |
| Enter new mailing address, if applicable: | | • | <u> </u> | <u> </u> |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | <u> 취임</u> |
| | | | <u> </u> | To the |
| | | | 3 | 37 |
| B. If amending the registered agent and/or regi | | our records, <u>enter t</u> | <u>he name</u> | of-the nev |
| registered agent and/or the new registered office ad | aress nere: | | | |
| | | | | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | • | | | |
| | Er | nter Florida street add | ress | |
| : | | , Florida | | |
| | City | | Zip Coa | le |

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 **Type of Action** Address **Title** <u>Name</u> Robert W. Main Mgr 3607 S 14th Street **✓** Add Alexandria, VA 22302 Remove Suwannee Marina Holding Mbmr 3607 S 14th Street ✓ Add Alexandria, VA 22302 Remove Add 🗌 Remove Add Remove □Add Remove \Box Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member Theodore M. Burt, Esq. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00