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C. LEWIS

FEB 9 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:	Picke	Pickerell's Sales & Leasing, LLC				
Name of Limited Liability Company						
		mendment and fee(s) are sub	_	•		
		Elizabeth W. Burt				
Name of Person						
Bell, Orr, Ayers & Moore, PSC						
Firm/Company						
1010 College Street, P.O. Box 738						
	Address					
		Bowling Green, K	′ 42102			
City/State and Zip Code						
burt@boamlaw.com E-mail address: (to be used for future annual report notification)						
F 6 4 1 6		•	•	ion)		
For further into	rmation co	ncerning this matter, please c	aii:			
Elizabeth W. Burt			_{at (} 270) 781-8111			
	Name of	Person	Area Code & Daytime T	elephone Number		
Enclosed is a ch	neck for the	e following amount:				
⅓ \$25,00 Filin	ig Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 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		tion Section	STREET/COURIER ADDRESS: Registration Section Division of Corporations			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 FEB -8 PM 2: 31

Pickerell's Sales & Leasing, LLC

SECRETARY OF STATE TALLAHASSEF, FLORIDA

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

(A F	florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number		p! 28, 2009 and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here	2
Pick's Sales & Leasing, LLC		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offi		ur records, <u>enter the name of the new</u>
New Registered Office Address:		
1.01 Registers Cline (Resident	Ent	er Florida street address
		, Florida
	City	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 Title <u>Name</u> <u>Address</u> **Type of Action** ☐ Add Remove ☐ Add Remove Remove □Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Feb. 3 2010 Resultable Signature of a member or authorized representative of a member Roger Welch, Manager Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00