109000099315

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Daguerant Number)
(Document Number)
Certified Copies ** Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000161977090

10/23/09--01016--016 **25.00

FILED 09 OCT 23 PM 4: 23 SECRETARY OF STATE TALLAHASSEE, FLORID.

D. BRUCE

OCT 26 2009

EXAMINER

COVER LETTER

Division of Corporations					
SUBJECT: Northwest Florida Monument + Vault, LLC Name of Limited Liability Company					
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Name of Person					
Northwest Florida Monument: Vault, LLC					
301 Swiff Creek DR					
Cantonment FC 32533 City/State and Zip Code					
City/State and Zip Code NWF Monumentand vau H @ Panhandle . M. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 150 132 - 9835					
For further information concerning this matter, please call:					
Name of Person at (850) 232-9835 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)}} \text{Certified Copy (additional copy is enclosed)}} \text{Certified Copy (additional copy is enclosed)}}					
MAILING ADDRESS: STREET/COURIER ADDRESS:					

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

Registration Section

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>109000099315</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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

<u>Title</u>	Name	Address	Type of Action
N <u>GRM</u>	Share Milsted	100 Beverly Parkway Pensacola, Fl 32505	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			O9 OCT 23 PA SECRETARY OF TALLAHASSEE, I
Dated	10/20,200 Lin M	19 / 1 / 1	PH 4: 23 OF STATE FLORIDA
	Lisa M	or authorized representative of a member . Heato \(\) or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00