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Office Use Only



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S. HAWKES

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EXAMINER

COVER LETTER

TO:

| то: | Registration S Division of Co | ection rporations | | |
|----------------|----------------------------------|--|---|-----------------|
| SUBJE | СТ· | Merge | Amelia, LLC | |
| 30000 | · | | ted Liability Company | |
| The enc | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please r | eturn all corresp | ondence concerning this matter | to the following: | |
| | | | Adam Sears Name of Person | |
| | | | Name of Ferson | |
| | | | Merge Amelia, LLC | |
| | | | Firm/Company | |
| ٤ | | 86 | 6123 Red Holly Place | |
| | | | Address | • |
| Vales El 00007 | | | | |
| | | | Yulee, FL 32097 City/State and Zip Code | |
| | | tapha | sears@premier-bev.com | |
| | | E-mail address: (1 | to be used for future annual report notification) | |
| For fur | ther information | concerning this matter, please of | all: | |
| | , | Adam Sears | at (904) 624-0469 | |
| Name of Person | | | Area Code & Daytime Telephone Numbe | r |
| Enclose | ed is a check for | the following amount: | | |
| ₹ \$25 | .00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | Certified Copy Certified (additional copy is enclosed) Certified Certified | ate of Status & |
| | Regis Divis P.O. I | tration Section ion of Corporations 30x:6327 | 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

| | N | <u>IERGE AMELI.</u> | A, LLC | | | | |
|---|-----------------------------|--|-----------------------------------|---------------------|-----------------|--------------|----------|
| (<u>Na</u> | me of the Limited L (A F | iability Company as Iorida Limited Liabilit | it now app o ty Company | ars on our record | <u>s.</u>) | | |
| The Articles of Organization | | • • | filed on | October 14, 2 | 2009 | _ and assign | ned |
| Florida document number | <u> </u> | | | | | | |
| This amendment is submitted | to amend the follow | ving: | | . • | TALL | SEÇE SEÇE | 71) |
| A. If amending name, enter | the new name of t | he limited liability c | ompany h | ere: | ,1 | 記録 | F |
| The new name must be distingu "L.L.C." | ishable and end with | the words "Limited Li | ability Com | pany," the designat | tion "LLC | or The att | reviatio |
| Enter new principal offices | address, if applicab | ole: | | · | | 割 | 22 |
| (Principal office address MU | ST BE A STREET | ADDRESS) | | | | ン | |
| Enter new mailing address, (Mailing address MAY BE A | | <u></u> | | | | | |
| B. If amending the regist registered agent and/or the | | | iddress on | our records, er | <u>iter the</u> | name of | the new |
| Name of New Regis | tered Agent: | | | | | ···· | |
| New Registered Off | ice Address: | | | | | | |
| | | | I | Enter Florida stree | et addres | ss | |
| | | | | , Florid | ia | | |
| | | Cin | <u></u> | | | 7in 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 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> <u>Name</u> <u>Address</u> **Type of Action MGRM** Tapha Sears 86123 Red Holly Place ☐ Add Yulee, FL 32097 ✓ Remove Remove □Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member Adam Soars
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00