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(Requestor's Name)				
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**EXAMINER** 



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SECRETARY OF STATE

## **COVER LETTER**

arin races	STEV	VSAND LLC				
SUBJECT:	Name of Limited Liability Company					
	f Amendment and fee(s) are sub condence concerning this matter					
		<del></del>				
		Firm/Company				
	719 Zebu Place Address					
	Fort Myers, FL 33913  City/State and Zip Code					
	Ste E-mail address: (	ewsandi@comcast.net to be used for future annual repo	rt notification)			
For further information	concerning this matter, please of	eall:				
	ohn Stewart	at (_239 )	565-2256			
Name	of Person	Area Code &	Daytime Telephone Number			
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration Division of Clifton Buil 2661 Execu Tallahassee	Corporations ding tive Center Circle FL 32301			
		<b>'</b>				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	STEWSAND LLC				
( <u>Name of the Limited L</u> (A F	ability Company as it now apported Limited Liability Company	ears on our records.)			
The Articles of Organization for this Limited Liab Florida document number	• • • • • • • • • • • • • • • • • • • •	October 27, 2009	and assi	gned	
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	ne limited liability company h	ere:			
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Con	pany," the designation "LL	C" or the a	bbreviatio	
Enter new principal offices address, if applicab	le:				
(Principal office address MUST BE A STREET)	ADDRESS)			0	
	<del></del>		9	SE	
			A0	물품	
Enter new mailing address, if applicable:			- 2	₩ <u>₹₩</u>	
(Mailing address MAY BE A POST OFFICE BO	<u></u>		P	GE YED	
			£	570	
			04		
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on	our records, enter the	e name of	the new	
registered agent and/or the new registered offic	e aduress nere:				
Name of New Registered Agent:					
New Registered Office Address:					
	Enter 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	John J Stewart	719 Zebu Place Fort Myers, FL 33913	Add Remove
			Add Remove
			Add Remove
			Add Remove
	·		Add Remove
<del> </del>			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
			_
	2 2 2 2 2	~>G	<del></del>
Dated <u>U</u>	John Sterner of a member	want	· <del></del>
	V	John J Stewart	
	lyped	a of princed name of signee	

Page 2 of 2

Filing Fee: \$25.00