

209000109780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

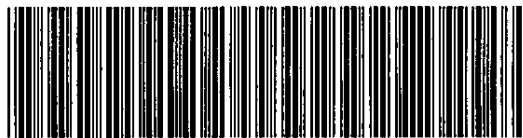
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2009 DEC 14 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS
DEC 15 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DESTINY LEASING 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:

W. Scott Garner
Name of Person

DESTINY LEASING LLC
Firm/Company

1817 Boswell Ave
Address

BRANSON MO 65616
City/State and Zip Code

SARA.garner@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

W. Scott Garner at 417 593 9926
Name of Person Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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 enclosed)
☐ \$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

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**

DESTINY LEASING LLC

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

The Articles of Organization for this Limited Liability Company were filed on Nov. 16, 2009 and assigned Florida document number L09000109 780

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DESTINY LEASING

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "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

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	Name	Address	Type of Action
MGRM	Antero trust	2420 W. Brandon Blvd #137 Brandon FL 33511	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	W SCOTT GARNER	2420 W Brandon Blvd #137 BRANDON FL 33511	<input checked="" type="checkbox"/> Add KEEP <input type="checkbox"/> Remove
MGRM	Sara Garner	2420 W Brandon Blvd #137 BRANDON FL 33511	<input checked="" type="checkbox"/> Add KEEP <input type="checkbox"/> Remove
MGRM	Trinity trust		<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated December 10, 2009.

W Scott Garner

Signature of a member or authorized representative of a member

W SCOTT GARNER

Typed or printed name of signee

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2009 DEC 11 PM 12:07
TALLAHASSEE, FLORIDA
SECRETARY OF STATE