

LO9000112749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

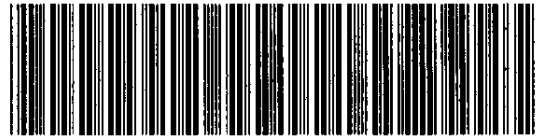
Special Instructions to Filing Officer:

**L. SELLERS**

DEC 29 2009

**EXAMINER**

Office Use Only



400163709064

12/28/09--01005--005 \*\*25.00

FILED  
09 DEC 28 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**R. WILLIAM FUTCH, P.A.  
610 S.E. 17<sup>TH</sup> STREET  
OCALA, FLORIDA 34471**

**R. William Futch  
Admitted in Florida and Texas  
Certified Circuit Civil Mediator**

**Tel. No: (352) 732-8080  
Fax No: (352) 732-8023  
E-mail address: rwfutchpa@aol.com**

**Jon I. McGraw  
Admitted in Florida only**

**E-mail address:jmcgrawlaw@aol.com**

December 24, 2009

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

RE: CORRECT SPELLING OF LLC - SUZIE Q CREATIONS, LLC  
REF. NUMBER: L09000112749

Dear Sir/Madam:

Please find enclosed the Cover Letter together with the original Articles of Amendment to Articles of Organization executed by the Manager of the LLC, that unfortunately was misspelled in connection with the above referenced matter.

If you would be so kind as to file the enclosed Articles of Amendment to Articles of Organization with your office, I would be most appreciative.

Also enclosed is our check made payable to your organization in the amount of \$25.00 representing the filing fee to file same with your office.

If you should have any questions or comments, please do not hesitate to contact our offices.

We wish you and your staff a Happy Holiday Season!

Very Truly Yours,

BY

  
\_\_\_\_\_  
R. WILLIAM FUTCH

RWF/kad  
Enc.

(Check #3269)

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SUSIE Q CREATIONS, 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:

**R W FUTCH**  
Name of Person  
**R WILLIAM FUTCH PA**  
Firm/Company  
**610 SE 17TH STREET**  
Address  
**OCALA FL 34471**  
City/State and Zip Code  
**RWFUTCHPA@AOL.COM**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**R W FUTCH** at ( **352** ) **732-8080**  
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 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**

**SUSIE Q CREATIONS, 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 NOVEMBER 24, 2009 and assigned Florida document number L09000112749.

This amendment is submitted to amend the following:

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

SUZIE Q CREATIONS, LLC

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*

FILED  
09 DEC 28 AM 8:2  
TALLAHASSEE  
FLORIDA

**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:**

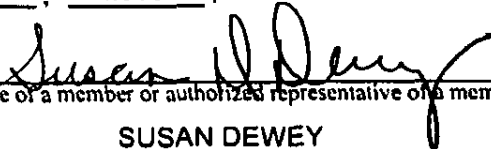
**MGR = Manager**  
**MGRM = Managing Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input 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.)**

NONE  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Dated DECEMBER 23, 2009

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member

**SUSAN DEWEY**  
 \_\_\_\_\_  
 Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

09 DEC 28 AM 8:21

FILED