L09000113908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
May 10 2011
EXAMINER

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2011

DOUGLAS C. BARNARD
SUZY F. HOMEMAKER LLC
1835 E. HALLANDALE BEACH BLVD #141
HALLANDALE BEACH, FL 33009

SUBJECT: VIRTUAL ACREAGE, LLC
Ref. Number: L09000113908

We have received your document for VIRTUAL ACREAGE, LLC and your check(s) totaling $60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

The total amount due to reinstate is $377.50.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 411A00010108

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Virtual Acreage 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:

Douglas C. Barnard
Name of Person

Suzy F. Homemaker LLC
Firm/Company

1835 E. Hallandale Beach Blvd. #141
Address

Hallandale Beach, FL 33009
City/State and Zip Code

doug@suzyfhomemaker.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas Barnard at (561) 318-0465
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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Virtual Acreage 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 11/30/2009 and assigned Florida document number L09000113908.

This amendment is submitted to amend the following:

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

Suzy F. Homemaker 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)

1835 E. Hallandale Beach Blvd #141
Hallandale Beach, FL 33009

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: 1835 E. Hallandale Beach Blvd #141
Enter Florida street address

Hallandale Beach, **Florida** 33009
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	Doreen Cott	1414 Adams St Hollywood, FL 33020	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated APRIL 20, 2011.

Signature of a member or authorized representative of a member

Douglas C. Barnard
Typed or printed name of signee

Filing Fee: $25.00