Division of Corporations Electronic Filing Cover Sheet

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(((H10000141535 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

ACCOUNT Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000514

Phone : (727)442-1200

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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S. HAWKES

Electronic Filing Menu Corporate Filing Menu

JUN 17 2010 Help

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ST. ALBER			
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears o	n our records.)	 خند:
(**1.50,000			
The Articles of Organization for this Limited Liability Company w	ere filed on	12/07/2009	and assigned
Florida document numberL09000115989			and assisted
This amendment is submitted to amend the following:			100 os 10
A. If amending name, enter the new name of the limited liabil	ty company here:		0
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company,	" the designation "L	LC" or the abbreviation
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 registered agent and/or the new registered office address here:	e address on our	records, enter t	he name of the new
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

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H100001415353

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:

MGRM = Managing Member Title **Address** Type of Action <u>Name</u> MGR MARK W. SHABLA 635 FIRST STREET NORTH □ Add ☑ Remove WINTER HAVEN, FL. 33881 MGR LAUREN OAKLEY 250 AVENUE K SOUTHWEST Romove SUITE 100. WINTER HAVEN, EL. 33880 bbA 🔲 Remove ___ Ad**d** 133 ...Ad**∂** \Box Remove ö ∞ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 15 2010 Signature of a member or authorized representative of a member MARK W. SHABLA, as Manager Typed or printed name of signee

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Filing Fee: \$25.00

MGR = Manager