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SECRETARY OF STATE
TALLAHASSEE, FIRE

FILED

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: EMILY'S HONEY 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:		
MICHELLE RUDY Name of Person BRADCO, INC.		
BRADCO, INC.		
3042 PEACHTREE ROAD Address	2010 FEB -3 PH 4: 03	7
ATLANTA GA 30319 City/State and Zip Code	48 Y 0	FILE
City/State and Zip Code Tichard @ bradco-attanta.com E-mail address: (to be used for future annual report notification)	0 : h M	D
For further information concerning this matter, please call:	င်း	
MICHEUE RUDY at 404, 233-1676 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:	_	
S25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} Certified Copy (a	f Status &	osed)
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

(A Florid	a Limited Liability	Company)	ar records.		
The Articles of Organization for this Limited Liability Florida document number 1090018	Company were	filed on <u>12/11</u>	12009	and as	ssigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the li		ompany here:			
The new name must be distinguishable and end with the value. L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		bility Company," th	e designation "TALLAHASSEE,	2010 FEB -3	abbreviation
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_		FLORIDA	PH 4: 03	Ö
B. If amending the registered agent and/or regregistered agent and/or the new registered office action. Name of New Registered Agent:		ddress on our red	cords, <u>enter th</u>	e name	of the new
New Registered Office Address:	1950 US MIRAMA City	Enter Flo P BCH	west wrida street addr _, Florida	ess B2551 Zip Coa	<u>2</u>

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, Thereby 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 = M	anaging Member		
<u>Title</u>	Name	Address	Type of Action
MCR	FRANK-B BRADSHAW ##	3642 PEACHTREE ROAD NE ATLANTA GA 30319	Add Remove
MGR	GREG DAVIS	BIGHTZ PEACHTREF ROAD NE ATLANTA GA 30319	Add Remove
			Add Remove
			Add Remove
		ALLAHAS	SECOLAND TO SECOND TO SECO
		SEE, FEO RE	SAdd FRemove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
Dated	ANUARY 27, 20	10	
	FRANK B BRADS	or authorized representative of a member	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00