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J. BRYAN

MAR 2 1 2012

EXAMINER

COVER LETTER

TO: Registratio Division of	n Section Corporations			
SUBJECT:	Gregory Sha	ackleton Florida LLC		
	Name of Lim	ited Liability Company		
The enclosed Article	s of Amendment and fee(s) are su	bmitted for filing.		
Please return all corr	espondence concerning this matte	r to the following:		
	Terr	i Searing - 503-228-1455		
		Name of Person		
	Josselson & Potter			_
		Firm/Company		TASE TO
9400 SW Beave		erton-Hillsdale Hwy, Ste 13	31-A	2012 MAR 20 PM 1: 19 SECRETARY OF STATE TALLAHASSEE, FLORIDA
		Address		20 ASS
	Beaverton, OR 97005		THE R	
	City/State and Zip Code			F. S.
	E mail addresse	terri@jprlaw.com	History	19 RIE 19
Ean fauth an informati			ппсаноп)	<i>y</i>
ror turiner informati	on concerning this matter, please	can:		
	Terri Searing	at (_503_)	228-1455	
Nar	me of Person	Area Code & Dayti	me Telephone Numbe	r
Enclosed is a check f	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certified	ite of Status &
	AILING ADDRESS:	STREET/COUR Registration Sect	RIER ADDRESS:	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Grego	ory Shackleton Florida Ll	_C	
(<u>Name of the Limited</u>) (A	Liability Company as it now appear Florida Limited Liability Company)	s on our records.	
The Articles of Organization for this Limited Lia	ability Company were filed on	12/22/2009	and assigned
Florida document number L09000121	505		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	ble:		720
(Principal office address MUST BE A STREET	(ADDRESS)		写
Enter new mailing address, if applicable:		_	20 PR
(Mailing address MAY BE A POST OFFICE E	BOX)		Cord :
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	10001 West Oakland Park	Blvd, Third Floor	
	Ent	er Florida street addi	ress
	Sunrise	, Florida	33351
	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			AddRemove
			Add Remove
			Domous
D. If amen	ding any other information,	enter change(s) here: (Attach additional she	ets, if necessary.)
_			2012 HAR TAPLCAH
			20 ARY SSE
Dated	March 14		PH 1: 19 OF STATE E. FILORIDA
		WW.	
	Signatur	e of a member or duthorized representative of a mo	ember
		Irving Potter Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00