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G. MCLEOD

JAN 22 2010

EXAMINER



900166689089

01/22/10--01023--004 **25.00

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Cody's Backyard, 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:				
Gilberto E. Sanchet, ESO. Name of Person				
Sarchez Law Offices PF				
1145. Fremont Ave				
City/State and Zip Code				
For further information concerning this matter, please call:				
Silberto E. Sanche 2. (80) at (813) 354. 1777 Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$				
MAILING ADDRESS: STREET/COURIER ADDRESS:				

Registration Section
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

(Name of the Limited Liability	Y Company as it now appears on ou Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability C	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
•		A CO
Enter new mailing address, if applicable:		JAN CARES
(Mailing address MAY BE A POST OFFICE BOX)		SE N
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Flor	rida 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

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>	Name	Address	Type of Action
<u>MGR</u> M	Jeffrey Schneider	2836 E. Bears Sueme Tanpa, FL 33613	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendia	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	_
			_
			-
Dated		or authorized representative of a member	
_	Gilberto E. S	<u> </u>	

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Filing Fee: \$25.00