## L10000009031

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FALLAHASSEE, FLORIDA

## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJI					
			tierges Service, LLC ited Liability Company		
The en	closed Articles o	f Amendment and fee(s) are sul	omitted for filing.		
Please	return all corresp	condence concerning this matter	r to the following:		
			Adrian E. Smith Jr.		
Avalon			n Concierges (Concierges, LL	<u>.C</u>	
Firm/Company					
13820 Old St. Augustine Road Suite 113-211				113-211	
Address					
		1	acksonville, FL 32258		
	,		City/State and Zip Code		
		Hendersor	n-SmithConsultants@jun	o.com	
		E-mail address: (	to be used for future annual report n	otification)	
For fur	ther information	concerning this matter, please of	call:		
Adrian Smith		at ( 904 )	803-8010		
	Name	of Person	Area Code & Day	time Telephone Number	
Enclos	ed is a check for	the following amount:			
<b>□\$2</b> 5	5.00 Filing Fee		\$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee, Certificate of Status & Sed) Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g Center Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

'F/	LED
SECKETANO	AM 10: 50
SECRETARY TALLAHASSE	OF STATE E, FLORIDA

		TATUMETARY	Λn.
Avalon Concierge	es Service, LL	C 'ALLAHASSE	Ur STATE
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears	C TALLAHASSE	TORIDA
(A Florida Limited L	iaomity Company)		
The Articles of Organization for this Limited Liability Company	was filed on the	anuary 25, 2010	and assigned
	were med on	andary 20, 2010	_ and assigned
Florida document numberL1000009031			
This amendment is submitted to amend the following:			
ins amendment is submitted to amend the following.			
A. If amending name, <u>enter the new name of the limited liab</u>	lity company bere	:	
		r	
Avalon Concie	<u> </u>		
The new name must be distinguishable and end with the words "Limit	ted Liability Company	y," the designation "LLC	or the abbreviation
"L.L.C."		1	
Enter new principal offices address, if applicable:	۸	///	•
• • •	//		
(Principal office address MUST BE A STREET ADDRESS)		<del>/                                    </del>	
	/ \	/ / / !	
		/ /	
Enter new mailing address, if applicable:		· /	
		1///	
(Mailing address MAY BE A POST OFFICE BOX)		<i>11/14</i>	
	/	/	
		1	
B. If amending the registered agent and/or registered off	fice address on ou	ir records, enter the	name of the new
registered agent and/or the new registered office address here			
Name of Navy Designand Accepts	1 /	' / /	
Name of New Registered Agent:		<del>///</del>	
New Registered Office Address:		/ P	
	Enfe	er Florida street addres	S
	·		
		, Florida	
	City		Zip Code

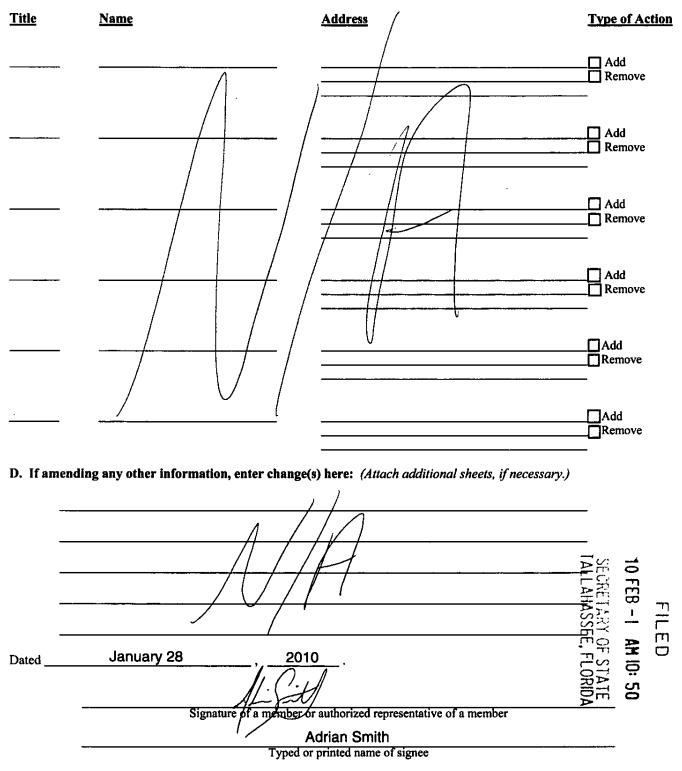
New Registered Agent's Signature, if changing Registered Agent:

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



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Filing Fee: \$25.00