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EXAMINER

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COVER LETTER

TO: Registration Section
Division of Corporations

UBJECT: STREET; LECOTOR STREET

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:

		James C. Taylor			
	Firm/Company				
	4300 Bayou Blvd., Suite 16				
	Address				
	Pensacola, FL 32503				
		City/State and Zip Code			
		jtaylor@tvm-law.com			
	E-mail address:	(to be used for future annual report notifi	cation)		
For further information con	cerning this matter, please	call:			
JAMES C. TALOR		at (850)	474-1030		
Name of F	Person	Area Code & Daytime	e Telephone Number		
Enclosed is a check for the	following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 1 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

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 Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

503 N. B	AYLEN S	<u>SIREET, L</u>	LC			
(Name of the Limited Liabil (A Florid	lity Company la Limited Lia	<u>as it now appea</u> bility Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Florida document number			March 2, 2010) ar	nd assig	ned
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the li	mited liabil <u>i</u>	ty company he	re:			
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited	d Liability Comp	any," the designation	"LLC" o	r the ab	breviation
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADI	DRESS)					
						
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
	-					
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		ee address on	our records, enter	the na	me of	the new
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·			SEC	==	
New Registered Office Address:				AHA THE	PR	1 [
		En	ter Florida street a	ddig s o ===	9	
		City	, Florida _	F Oin	Cod e	
New Registered Agent's Signature, if changing Register		,		REE	27	
					-	

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

A samending 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>	<u>Name</u>	Address	Type of Action		
MGR	JAMES C. TAYLOR	4300 BAYOU BLVD., SUITE 16 PENSACOLA, FL 32503	Add Remove		
<u>MGR</u>	WILLIAM H. TAYLOR	4300 BAYOU BLVD, SUITE 16 PENSACOLA, FL 32503	✓ Add ☐ Remove		
MGR	MARJORIE G. TAYLOR	4300 BAYOU BLVD., SUITE 16 PENSACOLA, FL 32503	Add Remove		
MGR	GLENNA O. TAYLOR	4300 BAYOU BLVD., SUITE 16 PENSACOLA, FL 32503	Add Remove		
			Add Remove		
			Add Remove		
D. If an	mending any other information, enter c	change(s) here: (Attach additional sheets, if necessary	.)		
	Profits & Losses: JAMES C. TA	YLOR & MARJORIE G. TAYLOR, HUSBAN	<u>D</u>		
	AND WIFE - 50%; WILLIAM H.	TAYLOR AND GLENNA O. TAYLOR, HUSB.	AND		
	AND WIFE - 50%				
		1			
Dated _	Signature of a member or authorized representative of a member				
	Signature of a mu	ember or authorized representative of a member \(\) JAMES C. TAYLOR			
		Typed or printed name of signee	· · ·		

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Filing Fee: \$25.00