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J. SAULSBERRY EXAMINER

JAN 4 2011

COVER LETTER

TO:	Registration S Division of Co						
SUBJE	ECT:	SoyBrite Ca	ndle Company, LLC				
	<u> </u>		ited Liability Company				
The en	closed Articles of	f Amendment and fee(s) are su	bmitted for filing.				
Please	return all corresp	ondence concerning this matte	r to the following:				
			G. Frank Meekins Name of Person				
			Name of Ferson				
		SoyB	rite Candle Company, LLC		#œĬ _	_	
			Firm/Company) =	
			P.O. Box 56685			70 II IAN	
			Address			یا	
		Sair	nt Petersburg, FL 33732		1		
			City/State and Zip Code		95 20		£
		fr	ank@mysoybrite.com to be used for future annual report notifi		êF ;	_ 	
For fur	ther information	E-mail address: (concerning this matter, please of		cation)			
	G. F	- -rank Meekins	at (813)	404-4516			
	Name o	of Person	Area Code & Daytime	Telephone Number			
Enclose	ed is a check for t	he following amount:					
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)) Certified	te of Status &		d)
	Regist Divisio P.O. B	JING ADDRESS: ration Section on of Corporations fox 6327 assee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ations nter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SoyBrite Can	dle Company, Ll	LC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appear ited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Com	pany were filed on	3/9/2010	and ass	igned
Florida document numberL10000026018				
This amendment is submitted to amend the following:				
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 the words "L.L.C."	Limited Liability Compa	any," the designation	"LLC" or the a	abbreviation
Enter new principal offices address, if applicable:				7/1
(Principal office address MUST BE A STREET ADDRES.	<u></u>			が、 から は ない ない ない ない ない ない ない ない ない ない
			men _	* ************************************
Enter new mailing address, if applicable:	P.O. Box 566	85	F SIA	Section Sectio
(Mailing address MAY BE A POST OFFICE BOX)		ourg, FL 33732	<u>y</u> 0	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>ente</u>	r the name o	f the new
Name of New Registered Agent:				
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·			
	En	ter Florida street a	iddress	
		, 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:

MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action MGR Timothy R. Huff 1557 77th Ave N Saint Petersburg, FL 33702 ✓ Add Remove Add Remove Add 🔲 Remove Add Remove ∏Add Remove

 		, e.,

2010

Remove

Dated December 30

MGR = Manager

Signature of a member or authorized representative of a member

G. Frank Meekins

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00