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# **COVER LETTER**

TO:					
~1.15 LV					
SORTE	CI:	Name of Limi	ted Liability Company	<del></del>	
The enc	closed Articles of A	Amendment and fee(s) are subs	nitted for filing.		
Please r	eturn all correspor	ndence concerning this matter t	to the following:		
	Registration Section Division of Corporations  WINTER QUARTERS, LLC  Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for filing.  see return all correspondence concerning this matter to the following:  Michael D. LaBarbera  Name of Person  LaBarbera and Campbell  Firm/Company  13309 Winding Oak Court. Suite B  Address  Tampa, Florida 33612  City/State and Zip Code  mdlabarbera@aol.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  chael D. LaBarbera  Name of Person  Area Code  Daytime Telephone Number  Possed is a check for the following amount:  \$25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (cudditional copy is enclosed)				
			Name of Person		
		LaBarbera and Campbell			
			Firm/Company		
		13309 Winding Oak Court	. Suite B		
			Address		
		Tampa, Florida 33612			
			City/State and Zip Code	<del></del>	
		mdlabarbera@aol.com			
		E-mail address: (	to be used for future annual report notifi	cation)	
For fun	ther information co	oncerning this matter, please ca	all:		
Micha	el D. LaBarbera		at ()		
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check for th	ne following amount:			
<b>■</b> \$2:	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	

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 Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WINTER OUARTERS, LLC.				
(Name of the Limi	ted Liability Company (A Florida Limited Liab	as it now appears on our record ility Company)	<u>ls.</u> )	
The Articles of Organization for this Limited L	iability Company we	ere filed on March 22, 2010	and assign	ned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liabilit	y company here:		
The new name must be distinguishable and contain the v	sords "Limited Liability	Company," the designation "LLC	" or the abbreviation "L.L.C	
Enter new principal offices address, if applic	cable:			
(Principal office address MUST BE A STREE	<u>ET ADDRESS)</u>		<del></del>	
	-		··	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)		2011 SE	
			<u> </u>	77
B. If amending the registered agent and	or registered affic	re address on our record	29	the new
registered agent and/or the new registered o		e address on our record.	S, CHECK MAINE OF	
				i Land
Name of New Registered Agent:	Tracy Murphy			
New Registered Office Address:	212 Hawk Talon E	Drive		
- · <del></del>		Enter Florida street addres	33	—

### 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 605, 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.

City

Lithia

If Changing Registered Agent, Signature of New Registered Agent

, Florida <u>33547</u>

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being ac or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Tracy Murphy	212 Hawk Talon Drive	<b>=</b> Add
		Lithia , Florida 33547	<b>=</b> Au0
			Remove
			Change
			Add
			☐ Remove
			Change
			LI Add
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fan effective date is listed, the date must be specific and cannot be prior to date of filing Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	or more than 90 days al filing requirements, ;	otional) fter filing.) F this date w	Pursuant i Elf not b	to 605,020 c listed c
e record specifies a delayed effective date, but not an effecti The 90th day after the record is filed.		l a.m. or	$1$ the $\epsilon$	earlier (
James Murphy  James Murphy  James Murphy				
Mrs. Muchaly				
Signature of a member or authorized represent	ative of a member			

Page 3 of 3

Filing Fee: \$25.00