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MAR 1 3 2012 T. **HAMPTON**

COVER LETTER

Division of C	prporations			
SUBJECT:	Merstone Trust, LLC			
30biEC1.	Name of Limited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.			
Please return all corres	pondence concerning this matter to the following:			
	Nancy O. Honsa			
	Name of Person			
White & Luczak, P.A.				
	Firm/Company			
	558 West New England Avenue, Suite 240			
	Address			
	Winter Park, FL 32789			
	City/State and Zip Code			
	welwyn@welwyn.cnc.net E-mail address: (to be used for future annual report notification)			
For further information	concerning this matter, please call:			
	ancy O. Honsa at (407) 647-9300 of Person Area Code & Daytime Telephone Number			
Name	of Person Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	ed)		

MAILING ADDRESS:

TO:

Registration Section

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

MEDSTONE TOUST LLC

(Name of the Limited I	Liability Company as it now appears on our records.)
(A F	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Lial Florida document numberL100000375	ability Company were filed on April 5, 2010 and assigned 506
Γhis amendment is submitted to amend the follow	wing:
A. If amending name, enter the new name of t	the limited liability company here:
The new name must be distinguishable and end with 'L.L.C."	the words "Limited Liability Company," the designation "LLC" of the abbreviati
Enter new principal offices address, if applical	2 ^r 1 est
Principal office address MUST BE A STREET	raddress)
Enter new mailing address, if applicable:	5 8
Mailing address MAY BE A POST OFFICE B	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	r registered office address on our records, <u>enter the name of the naice address here</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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>	<u>Name</u>	Address	Type of Action
MGRM	JESSICA DELATER	P. O. Box 1523 Winter Park, FL 32790	☐ Add Remove
MGRM	AMBRY D. TROCHINSKI	P. O. Box 1523 Winter Park, FL 32790	Add ☑ Remove
			Add Remove
			AddRemove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necess	ary.)
			SECPET DIVISION O
			PHI2: 40
Dated	March 2	012	5 25
	Signature of a member		
		tichard E. DeLater	

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Filing Fee: \$25.00