L10000037683

(Requestor's Name)	
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EXAMINER



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DEFACTIVE OF STATE OF STATE OF CORPORATIONS TALLAHASSEE, FLORIDA

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11 JAN 25 PM 3: 41

SECRETARY OF STATE DIVISION OF CORPORATIONS



ACCOUNT	NO.	:	I20000000195

REFERENCE :

AUTHORIZATION :

\$ 25.00

COST LIMIT :

ORDER DATE: January 19, 2011

ORDER TIME: 12:33 PM

ORDER NO. : 648004-005

CUSTOMER NO: 7769795

DOMESTIC AMENDMENT FILING

NAME: BULLY BLING ENERGY, LLC

EFFECTIVE DATE:

ARTICLES OF AMENDMENT ___ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION, OF



	BLING ENERGY, LLC				
(<u>Name of the Limited Lia</u> (A Flo	ibility Company as it now appears of orida Limited Liability Company)	d onl Lecords")			
The Articles of Organization for this Limited Liabil Florida document number L10000037683	lity Company were filed on <u>04/07</u>	7/2010 and assigned			
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liability company here:				
The new name must be distinguishable and end with th	e words "Limited Liability Company,"	' the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	DDRESS)				
	*************************************	***			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX	X)				
	<u></u>	***************************************			
B. If amending the registered agent and/or r registered agent and/or the new registered office		records, enter the name of the new			
Name of New Registered Agent:					
New Registered Office Address:					
(Enter Florida street address)					
_	(C) (A)	, 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	LINDA CONKLIN	14965 FOSTER LANE HUGHESVILLE, MD 20637	Add Remove
MGRM	JOHN SCOTT CONKLIN SR.	14965 FOSTER LANE HUGHESVILLE, MD 20637	☑ Add Remove
MGRM	VICTOR FRANCIS GUIDO JR.	7205 FLINTVILLE ROAD OWINGS, MD 20736	Add Remove
			Add Remove
•			Add Remove
<u> </u>			Add
D. If amend	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
Dated	<u> - 2 - , 201</u>		
	KICHOARO CAL	or authorized representative of a member \(\(\(\)_1 = \(\) \\ or printed name of signee	

Page 2 of 2

Filing Fee: \$25,00