L100000044732

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EXAMINE	רח:

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COVER LETTER

	tration Section on of Corporations				
SUBJECT:	JAME	S PROCESS LLC			
sobster		imited Liability Company			
The enclosed A	rticles of Amendment and fee(s) are	submitted for filing.			
Please return al	Il correspondence concerning this ma	atter to the following:			
The second second second second	• • • •				
		JAMES ROGERS			
		Name of Person			
		JAMES PROCESS LLC		7 <u>2</u> 2	
		Firm/Company		2010 HAY SECRET	7
	8407 N. LAMAR			TARY TARY	-
		Address		Y OF	דורבר
		TAMDA EL 22604		15.55 1.55 1.55 1.55	
		TAMPA, FL 33604 City/State and Zip Code		ALE RED	
e de la companya de l		/ROGERS@YAHOO.COM			
		ss: (to be used for future annual report notif	ication)		
For further info	ermation concerning this matter, plea	se call:			* * *
	JAMES ROGERS	at (813)	727-0326		
	Name of Person	Area Code & Daytim	e Telephone Number		
	heck for the following amount:				
₹ \$25.00 Filin	ng Fee \$30.00 Filing Fee & Certificate of Statu	s Certified Copy (additional copy is enclosed	l) Certified	te of Status &	sed)
and the second of the second	MAILING ADDRESS:	STREET/COURI	ER ADDRESS:		
	Registration Section . Division of Corporations	Registration Section Division of Corporation	on		
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Ce Tallahassee, FL 32			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PROCESS LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appea limited Liability Company)	rs on our records.)	
	······································		
The Articles of Organization for this Limited Liability C	ompany were filed on	04/23/2010	and assigned
Florida document number L10000044732	<u>_</u> .		
This amendment is submitted to amend the following:			
A 16 and a diameter and a diameter and a 6th a Part	4 . J 15 . L 1854 L		2
A. If amending name, enter the new name of the limi		<u>re</u> :	
	G PROCESS, LLC		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Comp	any," the designation "I	or the abbreviation
Enter new principal offices address, if applicable:		* ***	
(Principal office address MUST BE A STREET ADDR	ESS)		<u> </u>
			Pm No
Enter new mailing address, if applicable:	<u></u>		
(Mailing address MAY BE A POST OFFICE BOX)			
S.A. G. C. C.			
B. If amending the registered agent and/or regist		our records, <u>enter</u>	the name of the new
registered agent and/or the new registered office addi	ress here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Er	nter Florida street add	tress
erik er i kristi kristi e		. Florida	
	City	, Fibrida	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>	<u>Address</u>	Type of Action
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D. If an	nending any other informat	ion, enter change(s) here: (Attach additional shee	ts, if necessary.)
\$ 1.00 m			
process of			
Dated	April 27	L , 2010.	
_	960	Tature of a mediber or authorized representative of a me	mber
. + . +		JAMES ROGERS Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00