L10000047431

- (Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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05/27/10--01027--025 **25.00



TO: Registration Section Division of Corporations			COVER LETTER	Vintage Guitar Closet,Llc. 30 East Ocean Blvd. Stuart, Florida 34994	
SUBJ	ЕСТ:		Guitar Closet	CLC.	
		Name	of Limited Liability Company		

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

P.O. Box 6327

Tallahassee, FL 32314

<u>Vintage</u> Terrell B Breat Jr. Name of Person intage Guitar ClosttLLC. Firm/Company SW East Ocean BLUD Address 34994 City/State and Zip Code Mtage quitar Closet & L E-mail address: (to be used for future annual report notification) mai For further information concerning this matter, please call: AH 11: 20 errell at (772) 360-8 Name of Person Area Code & Daytime Telephone Number Englosed is a check for the following amount: \$25.00 Filing Fee \$60.00 Filing Fee, \$30.00 Filing Fee & \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified,Copy (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: **Registration Section Registration Section Division of Corporations**

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle. Tallahassee, FL 32301

s	ES OF AMEND TO			
ARTICLE	S OF ORGANIZ	LATION		
	OF .			
Vintage	Guitar	Close	+	((
	la Limited Liability Comp	bany)		
The Articles of Organization for this Limited Liability Florida document number $\angle 10000047$	Company were filed on 243	May	4	20(0 and assigned

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:	17 <u>8</u>
(Principal office address MUST BE A STREET ADDRESS)	
	Stry 7 L
Enter new mailing address, if applicable:	m ^e s a m
(Mailing address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:	Terrell B	Brent Jr
New Registered Office Address:	30 SW1	East Ocean BLVD
	a , 1	Enter Florida street address
	Stuart	Florida 34994
	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

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Page 1 of 2

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>	Name	Address	Type of Action
MGRM	Terrell B Brent Sr	2883 SW Lake Mont Stuart FC 34994	Place Add Remove
MGRM	John D'Angeb	26 SW East D Cean Stuart FL 34994	Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	-
			-
Dated M C	1,242010		-
		authorized representative of a member	
-	Teon Typed or	ry Brent	
		Page 2 of 2	

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Filing Fee: \$25.00