## L10000050310

(Re	equestor's Name)	_		
(Ad	ldress)			
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
, (Bu	isiness Entity Nai	me)		
(Do	ocument Number)			
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10 MAY 12 PH DA LO

D. BRUCE
MAY 13'2010
EXAMINER

## **COVER LETTER**

TO: Registration Division of	n Section Corporations			
SUBJECT:	GADSDE	N STRONG, LLC		
	Name of Lim	nited Liability Company		
The enclosed Articles	s of Amendment and fee(s) are su	bmitted for filing.		
Please return all corre	espondence concerning this matte	er to the following:		
		Amy Windmiller		
		Name of Person		
		Roetzel & Andress		
		Firm/Company	_	
	420 Sou	uth Orange Avenue, 7th Floo	or	
		Address		
		Orlando, FL 32801	•	um g.
		City/State and Zip Code		
	E-mail address:	windmiller@ralaw.com (to be used for future annual report notific	cation)	
For further information	on concerning this matter, please			10 MAY 12 PH IN LO
,	Amy Windmiller	at ( 407 )	245-2457	
	ne of Person	at ( 407 ) 2 Area Code & Daytime	Telephone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &
	AILING ADDRESS:	STREET/COURIE		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GADSDI	EN STRONG, LLC		
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appearing the Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability C	ompany were filed on	May 10, 2010	and assigned
Florida document number L1000050310			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company he	ere:	
STRONG	G GADSDEN, LLC		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	<del></del>		
(Principal office address MUST BE A STREET ADDR	ESS)		3.7
			3
Enter new mailing address, if applicable:			112 SSE
(Mailing address MAY BE A POST OFFICE BOX)			79 3 m
-	<u> </u>		5 6 D
			Pri 69
B. If amending the registered agent and/or regist registered agent and/or the new registered office additional and the registered office additional and the registered office additional and the registered agent agen		our records, enter the	ie name of the new
Name of New Registered Agent:			**************************************
New Registered Office Address:			
	E	nter Florida street addr	ress
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

<u>itle</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
			Add Remove
. If amen	ding any other information, enter change(	(s) here: (Attach additional sheets, if necessary.)	10 MAY 12 TALLAHYSSEG
			TOF SHIP.
Pated	May 11 , 201	<u>0</u> .	_
	Signature of a thember o	or a)thorized representative of a member	
	CW	Scott Callahan	

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Filing Fee: \$25.00