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DETARTMENT OF STATE
DIVISION OF CORPORATIONS
TALL AHASSEE, FLORIDA

II JAN-4 PH 4:

B. KOHR
JAN-4 2011

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

					The second
Southeast Land Mit	tigation Resources,	LLC			THE LEWIS CO.
				Art of Inc. File	
· · · · · · · · · · · · · · · · · · ·				LTD Partnership File	
				Foreign Corp. File	
			 -	L.C. File	
		1		Fictitious Name File	
				Trade/Service Mark	
				Merger File	
	,			Art. of Amend. File	
		İ		RA Resignation	
		ľ		Dissolution / Withdrawal	
				Annual Report / Reinstatement	
				Cert. Copy	
	-		·	Photo Copy	
				Certificate of Good Standing	
				Certificate of Status	
				Certificate of Fictitious Name	
				Corp Record Search	
				Officer Search	
				Fictitious Search	
Signature				Fictitious Owner Search	_
5. g				Vehicle Search	
				Driving Record	
Requested by: BN	1/4/11 p.:	m		UCC 1 or 3 File	
Name	 '	m. me		UCC 11 Search	
IVAILLE	Date II	THE .		UCC 11 Retrieval	
Walk-In	Will Pick Up			Courier	

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

Southeast Land Mitigation Resources, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liab	ility Company were filed on	5/11/2010	and assigned
Florida document numberL1000005056	<u>62</u> .		
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of the	e limited liability company here	•	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Compan	y," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable	le:		
(Principal office address MUST BE A STREET)	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		r records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	Ente	r Florida street addre.	ss
		, Florida	
-	City		Zip Code
New Registered Agent's Signature, if changing Regi	stored 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:

	<u>Name</u>	Address	Type of Action
**************************************			Add Remove
			☐ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
		e(s) here: (Attach additional sheets, if necessary.)	
 _		Vatson, 1505 Thurso Rd., Lynn Haven,	
<u>Flo</u>	rida 32444 to: Paul C. Porter, 131	4 Mapleton Road, Jacksonville, FL 32207	_
		•	_
 Dated	January 3 20	11/2.	-
 Dated	1/2	or authorized representative of a member	_

Page 2 of 2

Filing Fee: \$25.00