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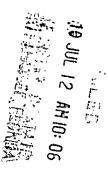
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S. HAWKES

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EXAMINER

COVER LETTER

	tration Section on of Corporations	•	, .		
SUBJECT:	LISA FARRELL	-SANDS. LLC			
Subject:	Name of Limited Lia				
The enclosed A	Articles of Amendment and fee(s) are submitted	for filing.			
Please return al	Il correspondence concerning this matter to the	following:			
•	•			•	
	. LYN C	CIAFFONE-LEE			
		Name of Person			
	TAX & FINANC	IAL-STRATEGIS	STS-LLC -		,
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•	E-mail address: (to be use	wondertax.com ed for future annual rep	ort notification)	<u>:</u>	
For further info	ormation concerning this matter, please call:				
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	LYN CIAFFONE-LEE Name of Person	at (239) Area Code &	591-25 Daytime Telepho		
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	MAILING ADDRESS: Registration Section	STREET/C Registration	COURIER ADI n Section	JRESS:	
	Division of Corporations		Corporations		
	P.O. Box 6327 Tallahassee, FL 32314		itive Center Circ	le :	. •

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LISA FARRELL-SANDS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) - MAY 24, 2010 心: The Articles of Organization for this Limited Liability Company were filed on ____ L10000055848 Florida document number-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."-1201 WESTFIELD DRIVE Enter new principal offices address, if applicable: FORT MYERS, FL 33919 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 1201 WESTFIELD DRIVE FORT MYERS, FL 33919 (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: Enter Florida street address-

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

Zip Code

MGR = Manager MGRM = Managing Member **Type of Action Title** <u>Name</u> Address **MGRM** LISA FARRELL-SANDS Add 1201 WESTFIELD DRIVE Remove · LISA FARRELL-SANDS MGRM | ✓ Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JUNE 26** 2010 Dated LISA FARRELL-SANDS Typed or printed name of signee

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:

Page 2 of 2

Filing Fee: \$25.00