LID000004479

•				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

L. SELLERS

AUG 25 2010

EXAMINER

Office Use Only



300184535523

08/23/10--01020--020 **30.00

SECRETARY OF STATE

COVER LETTER

TO:

Registration Section

Division of Corporations					
SUBJECT:	NEEDLIN E	NTERPRISES, LLC			
50B0ECT,		nited Liability Company			
The enclosed Articles	of Amendment and fee(s) are su	ubmitted for filing.			
Please return all corre	spondence concerning this matte	er to the following:			
	R	RICHARD P. FRANKLIN Name of Person			
		Name of Ferson			
	NEEDLIN ENTERPRISES, LLC				
Firm/Company					
	10337 LONGWOOD DRIVE				
		Address			
	LARGO, FL 33777				
		City/State and Zip Code			
	dor E-mail address:	nna.tavares@yahoo.com (to be used for future annual report notific	eation)		
For further informatio	n concerning this matter, please	call:			
RICH	ARD P. FRANKLIN	at (727)	656-4586		
Name of Person		Area Code & Daytime	Telephone Number		
Enclosed is a check for	r the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEEDLIN ENTE	<u>RPRISES, L</u>	LC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appea Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company Florida document numberL1000064479	were filed on	JUNE 16,2010	and as	signed	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Comp	any," the designation	"LLC" or the	abbreviation	
Inter new principal offices address, if applicable: 4360 PARK STREET NORTH					
(Principal office address MUST BE A STREET ADDRESS)	ST. PETERSBURG, FL 33709				
					
Enter new mailing address, if applicable:	10337 LONGWOOD DRIVE				
(Mailing address MAY BE A POST OFFICE BOX)	LARGO, FL	33777			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	<u>e</u> :	our records, <u>enter</u> nter Florida street ac , Florida _	SECRETARY TABBAHLSSE		
	City		Coop division	e	

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 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> **Type of Action** <u>Name</u> **Address** MGRM VICKI L. FRANKLIN 5630 PARK BLVD., SUITE C ☐ Add PINELLAS PARK, FL 33781 Remove ☐ Add Remove ☐ Add ☐ Remove ∏ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **AUGUST 13** 2010 Dated_ Signature of a member or authorized representative of a member RICHARD P. FRANKLIN

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00