L10000b69867

(Requestor's Name)
(Address)
(Address)
· (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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11/18/10--01002--001 **25.00

T. HAMPFON

NOV 1 8 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporatio	ns		•
SUBJI	ест:	and Magne Name of Limit	ed Liability Company	
The en	nclosed Articles of Amendr	nent and fee(s) are sub	mitted for filing.	
Please	return all correspondence	concerning this matter	to the following:	
		Samant	ha Snipes Name of Person	
		Land M	lagnet LLC Firm/Company	
		1093 A	IA Beach Bluo +	=268
		St. Ava	City/State and Zip Code	30 Can
		E-mail address: (to	o be used for future annual report notifica	
For fur	rther information concerning	ig this matter, please ca	all:	•
<u></u>	Samarthas Name of Person	nipes	at (904) 826-73 Area Code & Daytime	329 Telephone Number
Enclos	sed is a check for the follow	ving amount:		
\$25		0.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 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/COURIER ADDRESS:

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 NOV 17 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 15, 2010

SAMANTHA SNIPES 1093 A1A BEACH BLVD # 268 ST AUGUSTINES, FL 32080

SUBJECT: LAND MAGNET LLC Ref. Number: L10000069867

We have received your document for LAND MAGNET LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 010A00026737

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Land Magnet	t LLC	FILE FRANCE V 17		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our r	ecords.)		
(A Fiorida Limi	ned Liability Company)	S I RA		
The Articles of Organization for this Limited Liability Com	pany were filed on 429	2010 and assigned		
Florida document number <u>L 100000 69867</u> .		v		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
The Deal Magnet	11/			
The Deal Magnet The new name must be distinguishable and end with the words "	Limited Liability Company." the de	esignation "LLC" or the abbreviation		
"L.L.C."	Zimiou sidemy company, and a			
Enter new principal offices address, if applicable:				
• •				
(Principal office address MUST BE A STREET ADDRES	2)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registere	d office address on our recor	ds, enter the name of the new		
registered agent and/or the new registered office address		·		
Name of New Registered Agent:				
Charle of the Wiley Interior Figure .				
New Registered Office Address:				
	Enter Florida street address			
	, 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager ⁄Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
			AddRemove
D. If amend		ge(s) here: (Attach additional sheets, if necessar 2071 — S VMMMAC	THE EIN#
			SECRETARY OF BIVISION OF CORPE
Dated	Nov 7 20	10 C	7 AM 8: 12
	Signature of a member	r or withorized representative of a member	
	Saman	The Sni Des Tor printed name of signee	

Page 2 of 2

Filing Fee: \$25.00