

L100000069985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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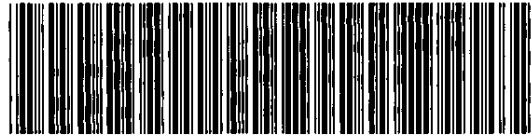
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 SEP 27 AM 11:52

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J. SAULSBERRY
EXAMINER

SEP 30 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Amos 5:24, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jon Franz

Name of Person

Firm/Company

601 E. Twiggs Street #300

Address

Tampa, FL 33602

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jon Franz

Name of Person

at (813)

221-1900

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(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 Liability Company were filed on July 1, 2010 and assigned Florida document number L10000069985.

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

601 E. Twiggs Street #300

Tampa, Fl 33602

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

601 E. Twiggs Street #300

Tampa, Fl 33602

FILED
2010 SEP 27 AM 11:52
SECOND DAY OF STATE
HALL, ALABAMA, FLORIDA

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:

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 = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Pallardy, LLC	609 E. Jackson Street #200 Tampa, FL 33602	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Whitney One, LLC	2819 West Morrison Ave Tampa, FL 33629	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Derek Pettigrew	601 E. Twiggs Street #300 Tampa, FL 33602	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Lacho & Franz, LLC	3523 Yale Circle Riverview, FL 33578	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Lee Pallardy, Inc.	609 E. Jackson Street #200 Tampa, FL 33602	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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2010 SEP 27 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated _____

Signature of a member or authorized representative of a member

Henry Franz

Typed or printed name of signee