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SECRETARY OF STATE

2011 HAR 30 PM 4: 23

COVER LETTER

TO:

то:	Registration Sectorial Division of Corp				
SUBJECT: Blog Net, LLC					
		Name of Limi	ited Liability Company		_
The en-	closed Articles of A	mendment and fee(s) are sul	bmitted for filing.		
Please	return all correspon	dence concerning this matter	to the following:		
	Daniel L Fox II		_		
			Name of Person		
Blog Net, LLC					
Firm/Company					
1805 SE 16th Ave Suite 901				~	
			Address		
			Ocala, FI 34471		ARR
			City/State and Zip Code		30 ARY SSE
		E-mail address: (propertyjen@yahoo.cor to be used for future annual report	n t notification)	30 PH SSEE, FI
For fur	ther information cor	ncerning this matter, please c	call:		2011 MAR 30 PM 4: 25 SEURE TARY OF STATE TALLAHASSEE, FLORIDA
	Dan	iel L Fox II	at (_352_)_	804-5008	
	Name of I	Person	Area Code & D	aytime Telephone Numl	ber
Enclose	ed 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 enc	Certifi closed) Certifi	Filing Fee, cate of Status & ed Copy onal copy is enclosed)
	Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 see, FL 32314	Registration S Division of C Clifton Buildi	orporations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Blog Net, LLC				
(Name of the Limite	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited	Liability Company were filed on	7/8/2010	and assigned	l	
Florida document number L1000007	72163				
This amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :			
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Comp	any," the designation "I	LLC" or the abbrev	riation	
Enter new principal offices address, if appli	icable:	,	7 20		
(Principal office address MUST BE A STRE	ET ADDRESS)	<u>-</u> 11	LL HAR		
			R 30	Ching's am	
Enter new mailing address, if applicable:			PR PR PR PR PR	T	
(Mailing address MAY BE A POST OFFICE	E BOX)		5 5	- -	
			25 RID		
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter t</u>	he name of the	new	
Name of New Registered Agent:					
New Registered Office Address:					
	Er	Enter Florida street address			
	City	, Florida	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member **Title** Name **Address Type of Action MGRM** Daniel L Fox 1805 SE 16th Ave Suite 901 _ Add Remove Ocala, FI 34471 ☐ Add Remove Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. 2010 Signature of a member or authorized representative of a member Daniel L Fox II Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00