110000086250

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J. SAULSBERRY EXAMINER

FEB 15 2011

COVER LETTER

то: '	Registration S Division of Co						
SUBJE	·CT:	Big Da	wg Baits LLC				
5000		Name of Limited Liability Company					
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please	return all corresp	ondence concerning this matter	to the following:				
			Don J. Schaefer		-		
		,	Name of Person				
Big Dawg Baits LLC				<u> </u>	1A c 20		
		Firm/Company	II FI				
	HACE B						
15254 Kittrell Drive Address Spring Hill, FL 34610					RY(C		
					2011 FEB 14 PH 4: 10 SECRETARY OF STATE JALLAHASSEE. FLORID		
	- RIG						
		m ort notification)	P				
For fur	her information	concerning this matter, please o	call:				
		on J Schaefer	at (727)	534-1738			
	Name o	of Person	Area Code &	Daytime Telephone Numb	er		
Enclose	ed is a check for t	the following amount:					
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327			\$55.00 Filing Fee & Certified Copy (additional copy is er	iling Fee, cate of Status & ed Copy onal copy is enclosed)			
			Registration	Corporations			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Big Dawg I	Baits LLC							
(<u>Name of the Limited</u> (/	<mark>I Liability Compa</mark> A Florida Limited I	ny as it now appe Liability Company	ars on our records.)						
The Articles of Organization for this Limited Liability Company were filed onAugust 12, 2010 and assigne Florida document numberL10000086250									
This amendment is submitted to amend the following	lowing:								
A. If amending name, enter the new name o	of the limited liab	ility company h	ere:						
The new name must be distinguishable and end wi"L.L.C."	ith the words "Limi	ited Liability Com	pany," the designation	"LLC" or the abb	reviation				
Enter new principal offices address, if applic	15254 Kittre	ell Drive							
(Principal office address MUST BE A STREE		Spring Hill,	FL 34610						
				<u> </u>					
Enter now mailing address if annicable			4.338 40 Al	; [Ti					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			(A)	ار ا					
(Mauting dauress MAT BE A POST OFFICE			TAFE ORIDA						
B. If amending the registered agent and registered agent and/or the new registered o			our records, <u>enter</u>	the name of	the new				
Name of New Registered Agent:	aefer								
New Registered Office Address:	ell Drive								
		E	Enter Florida street ac	ddress					
		Spring Hill	, Florida _	34610					
	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.

Changing Registered Agent, Signature of New Registered Agent

Page-1 of 2

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 Title Type of Action Name Address MGRM Jeffery D Weeks 16314 Night Heron Road ☐ Add Weeki Wachee, FL 34614 Remove Julie A. Schaefer MGRM 15254 Kittrell Drive ✓ Add Spring Hill, FL 34610 Remove ☐ Add Remove \neg Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) February 11 2011 Dated Signature of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00