## 10000081838

·				
(Requestor's Name)				
Terrel L. Hood 514 SW 2nd Avenue Ocala, FL. 34471 (352) 732-2660				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				

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600184673936 08/26/10--01016--022 \*\*25.00

Special Instructions to Filing Officer:

L. SELLERS

AUG 27 2010

**EXAMINER** 

Office Use Only

SEGRETARY OF STATE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa	RPRISES, LI	ars on our records )	
(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	8-17-10 and assi	gned
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	ere:	
The new name must be distinguishable and end with the words "Lim	ited Liability Comp	pany," the designation "LLC" or the a	bbrevia
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address here.		our records, enter the name o	f the
Name of New Registered Agent:			
New Registered Office Address:			
•	Enter Florida street address		
		, Florida	
	City	Zip Code	3

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>	Address	Type of Action
MGRM	BRITTANEY KILBURY	7003 SE 12TH CIRCLE OCALA, FL 34480	Add Remove
			Add Remove
****			Add Remove
			Add Remove
			Add Remove
		-	Add Remove
D. If amend	ing any other information, enter cha	nge(s) here: (Attach additional sheets, if necession	ary.)
_			
	· .		TALLAHA
Dated		7//	26 AM 9: ARY OF ST
	FRA	NKIE NICHOLSON III	9:50 FLORIDA

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