## L10000100693

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10/01/12--01010--003 ##25.00



J. BRYAN

OCT -2 2012

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Se Division of Cor			,
SUBJI	ECT: <u> </u>	Stanley Sta	HON LLC ted Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		StEVE	E Buckalew Name of Person	PH 3: 00
		Star	DEY Station 2LC	<del>-</del>
		SIZ Comm	ElCE DL GuitE  Address	<u>D</u>
		Panama Cir	Ly beach FC &	32408
		Sbuck E-mail address: (1	614 O GNGIL COM to be used for future annual report notifical	tion)
For fu	ther information c	oncerning this matter, please c	all:	
	HEVE BUI Name o	CKOLEW f Person	at ( <u>85)</u> <u>52</u> 7 - Area Code & Daytime T	0.0
Enclos	ed is a check for th	ne following amount:		
<b>X</b> )\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filmg 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stanley State	ion LLC
( <u>Name of the Limited Elability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number 2/0000100003	were filed on 4-24-12 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limit L.L.C."	ed Liability Company," the designation "LC" on the abbreviation
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	W. 3 0
	8
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	
Traumg daaress MAT BE A POST OF FICE BOAT	
New Registered Office Address: 512 Con	
	City J 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 = Man MGRM = Ma	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
MGZ	Dawn M Galbaaith	8108 lailel St Ponama city Beach Florida 32408	Add Remove
ne <u>mbe</u> l	Dale Buckalew	3227 Notical DL South Poet FL 32409	Add Remove
<del></del>			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
D. If amendi	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.	<del></del>
Dated 200	Herbel 27. 20	Andrew Comments of the Comment	P
Dated Sy	Signature of a member	or authorized representative of a member	

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Filing Fee: \$25.00