## L10000102749

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	,
(Cit	y/State/Zip/Phon	e #)
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(Bu	siness Entity Na	me)
(Do	cument Number)	)
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ABUNDANCOF STATE
ABUNDANCSEF FLORIDA

## · COVER LETTER

TO: Registration Security Division of Con		•	<b>*</b>
SUBJECT: Nave	lite, LLC		
		ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Andrew Wils	on	
	Navelite, LL0	Name of Person	
		Firm/Company	
	36181 East I	_ake Road Suite 1	118
		Address	<del></del>
	Palm Harbor	, FL 34685	
	andrew.wilson@r		
For further information of	E-mail address: (to concerning this matter, please ca	o be used for future annual report notificati	оп)
Cindy Wilso	-	727 202-104	0
<u>-</u>	of Person	at (at Code & Daytime Te	
Enclosed is a check for t	he 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

· · · · · · · · · · · · · · · · · · ·	12 NOV -5 PM 1.1 -
Navelite,	LLC SLUNCIARY OF STATE
(Name of the Limited Liability Compan (A Florida Limited Li	v as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L10000102749</u> .	were filed on 10/01/2010 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 "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	36181 East Lake Road Suite 118
(Mailing address MAY BE A POST OFFICE BOX)	Palm Harbor FL 34685
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here  Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address.	Enter Florida street address

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.

City

, Florida

Zip Code

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
	<del></del>		Add
			Remove
			<del></del>
			Add
			Remove
			<del></del>
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•			
			Remove
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<del></del>			Add
			Remove
	**************************************	<u> </u>	Add
			Remove
			<del></del>
		<del></del>	Add
			Remove

. Lí ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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-	**************************************
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ted	
	The State
	Signature of a member or authorized representative of a member
	Andrew Wilson
	Typed or printed name of signee

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Filing Fee: \$25.00

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