L10000116869

(Re	equestor's Name)		
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COVER LETTER

TO: Registration Section Division of Corporations

Walton Oaks Management, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

D. Michael Chesser

Name of Person

Chesser & Barr, P.A.

Firm/Company

1201 Eglin Parkway

Address

Shalimar, FL 32579

City/State and Zip Code

mike@chesserbarr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

D. Michael Chesser

, 850 **651-9944**

Name of Person

Area Code & Daytime Telephone Number

Enclosed 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 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 OF

(Name of the Limited L (A F	iability Company as it now appears of lorida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L10000116869</u>	oility Company were filed on Nove	ember 9, 2010 and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of t	he limited liability company here:	
Walton Oaks Services Company, L	LC	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,"	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicat	le:	
(Principal office address MUST BE A STREET	ADDRESS)	- 22 F
. Enter new mailing address, if applicable:		THE CONTRACT OF THE CONTRACT O
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	ce address here:	records, enter the name of the new
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Walton Oaks Management 11 C

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 . <u>Name</u> <u>Address</u> Type of Action Remove Remove Add Remove Remove

if amending any other into	rmation, enter change(s) her	re: (Attach additional sheets, if necessary.)
		
•		
January 22	2013	
	· \	
D.	Mr. Kask	Church .
	Signature of a member or author	orized representative of a member
D. Michael	Chesser	
	Typed or print	ed name of signee

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Filing Fee: \$25.00