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SECRETARY OF STATE
AND ASSEE, FLORID

J. BRYAN

JUN 1 4 2011

EXAMINER

COVER LETTER

TO: Registration So Division of Con			
SUBJECT: <u>F</u>	SH FRMAH'S Name of Limi	CORHER ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	•
	JAMES	W. GREEN Name of Person	· · · · · · · · · · · · · · · · · · ·
	13936 F	Firm/Company LAYA WAY Address	SECRETAR SECRETAR TALLARASS
	PEMSACOL JWDAU E-mail address: (1	A FL 3250 Cfty/State and Zip Code 565010 6MA1 to be used for future annual report notificati	7 PH 3: 34 SEE. FLORIDGE L. COM On)
For further information of	concerning this matter, please c		
JAMES Name o	W. GREEN	at (<u>\$50)</u> 776 - 16 Area Code & Daytime Te	fo7 elephone Number
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)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
Regist Divisio P.O. B	JING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FISHER MATIS CO (Name of the Limited Liability (A Florida	V Company as it now appears	on our records)	
(A Florida	Limited Liability Company)	in our records.	
The Articles of Organization for this Limited Liability (Company were filed on	-14-2010 and assigned	
Florida document number <u>L 10000 1183</u>			
rional document number	· 2_1		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company	," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		~	
(Principal office address MUST BE A STREET ADD	RESS)		
		SSE IS	
Enter new mailing address, if applicable:	 		
(Mailing address MAY BE A POST OFFICE BOX)			
		## 3	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		r records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
-	· · · · · · · · · · · · · · · · · · ·	, Florida	
	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.

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> Address **Type of Action** WILLIAM E BROWN, JR MGR ☐ Add Remove ☐ Add Remove Remove ___Add Remove ___Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member JAMES W. GREEN
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00