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Collins, Brown, Caldwell, Barkett, Garavaglia & Lawn

> CHARTERED ATTORNEYS AT LAW

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March 16, 2015

¹ BOARD CERTIFIED REAL ESTATE

² MASTER OF LAWS TAXATION

³ MASTER OF LAWS REAL PROPERTY DEVELOPMENT

⁴ MASTER OF LAWS ESTATE PLANNING AND ELDER LAW

⁵ CERTIFIED CIRCUIT MEDIATOR

⁶ ALSO ADMITTED IN DC AND SC 7 ALSO ADMITTED IN GA

⁸ ALSO ADMITTED IN THE COMMONWEALTH OF THE BAHAMAS

Registration Section Division of Corporations Department of State P. O. Box 6327

Re: **Horned Frog, LLC**

Tallahassee, Florida 32314

Dear Sir:

Enclosed please find an original and one conformed copy of the Articles of Amendment to Articles of Organization for the above named limited liability corporation. I would appreciate your filing the original with your office and returning the conformed copy with your Certificate attached together with the Certificate of Status to this office.

I am also enclosing our check in the amount of \$60.00 covering the following:

Filing Fee	\$25.00
Certified Copy	30.00
Certificate of Status	5.00

Thank you for your consideration in this matter.

Sincerely,

George G. Collins, Jr. (mja)

For the Firm

GGC, JR./mja Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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HORNED FROG, LLC

(Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>December 29, 2010</u> and assigned Florida document number L10000132019

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
	, H	lorida
	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 605, 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or</u> <u>Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

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I.

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Langfitt, John R.	1580 Island Cove Road	🖸 Add
		Ft. Pierce, FL 34949	Remove
AMBR	AMBR Langfitt, John R.	1580 Island Cove Road	Add
		Ft. Pierce, FL 34949	Remove
			Add Add St. Remark 18 PH 1: 42 Add SSEE FADA
			Add F
			Add
			Remove
······			🗆 Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effectiv	e date, if other than the date of filing: (optional)
(The effect the date t	ive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after his document is filed by the Florida Department of State)
Dated	2/7-7 2015
Dated _	Dol R. Lang WH
	Signature of a member or authorized representative of a member John R. Langfitt
	Typed or printed name of signee



Page 3 of 3

Filing Fee: \$25.00