L 11000001475

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C. LEWIS

JAN 1 8 2011

EXAMINER

COVER LETTER

		ration Sect on of Corpo		•	₩ .	.,
		* *			•	
SUBJEC	т:			MPANIES, LLC		
`			Name of Lin	mited Liability Company		
The enclo	osed Ar	rticles of A	mendment and fee(s) are s	ubmitted for filing.		
Please ret	turn all	correspond	dence concerning this matt	er to the following:		
			WIL	LIAM R. HUSEMAN, E	SQ.	
				Name of Person		
		·	WIL	LIAM R. HUSEMAN, F	P.A.	
				Firm/Company		
			3733 Un	iversity Blvd. West, Sui	ite 305-A	
				Address		
			JA	CKSONVILLE, FL 322	:17	
				City/State and Zip Code		
			E-mail address:	SEMAN@JAXATTYS.(: (to be used for future annual repo	COM ort notification)	
For furthe	er infor	mation con	cerning this matter, please	call:		
	WIL	I IAM R	HUSEMAN, ESQ.	at (904)	448-555	52
		Name of P			Daytime Telephone	
Enclosed	is a che	eck for the	following amount:			
▼ \$25.00	0 Filing	g Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	nclosed) (0.00 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 ARTICLES OF ORGANIZATION

FILED

2011 JAN 14 PM TELLE

JW (COMPANIES, LL	С	SECRET	ARY OF STATE
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now a	ppears on	our records AHA	SSEE, FLORIDA
(A Florid	a Difficu Diability Comp	any)		
The Articles of Organization for this Limited Liability	Company were filed or	ı JAN	UARY 5, 2011	and assigned
Florida document number L11000001475				
Fiorita accument number	'			
This amendment is submitted to amend the following:				
_				
A. If amending name, enter the new name of the li	mited liability compan	<u>v here</u> :		
•				
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability C	Company,"	the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	 			
(Principal office address MUST BE A STREET AD)	DRESS)			
				
Enter new mailing address, if applicable:				•
(Mailing address MAY BE A POST OFFICE BOX)				
manning under this man but a lost of the box				
				
B. If amending the registered agent and/or reg	istered office address	on our i	ecords, enter ti	he name of the nev
registered agent and/or the new registered office ad		on out 1	<u> </u>	10 110110 01 010 110
·				
Name of New Registered Agent:				
				,
New Registered Office Address:		Futor F	lorida street addı	*ASS
		Enter F	ાં પ્રાથમ જાત હતા વાલા છે.	ะงง
			, Florida	
	City			Zip Code
New Registered Agent's Signature, if changing Register	red 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	The EMM Family IRREVOCABLE TRUST	1405 North N Street Lake Worth, FL 33460-1951	Add Remove
			Add Remove
			Add Remove
	<u>. </u>		Add Remove
			AddRemove
			Add Remove
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary	·) —
			2011 JAN 14 T
Dated	JANUARY 10	2011	OF STATE
	ı	Dember or authorized representative of a member LLIAM R. HUSEMAN, ESQ. Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00