## 11000005160

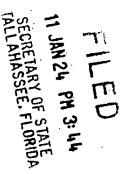
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J. BRYAN

JAN 25 2011

**EXAMINER** 

## **COVER LETTER**

10:	Division of Corp			
SUBJECT:1381			Sutton, LLC	
SCEGI			ted Liability Company	
The end	closed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please 1	return all correspon	dence concerning this matter	to the following:	
		Wil		
			Name of Person	
		W	William R. Huseman, PA	
			Firm/Company	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
37		3733 Un	iversity Blvd. West, Ste 305	iA FOR STATE
		,	Address	RIDE
		J	acksonville FL 32217	
			City/State and Zip Code	
		E-mail address: (	useman@jaxattys.com to be used for future annual report notif	ication)
For fur	ther information co	ncerning this matter, please o	call:	
		R. Huseman	at ( 904 )	448-5552
Name of Person		Area Code & Daytim	e Telephone Number	
Enclose	ed 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)
	Registra Division P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327. see, FL 32314	STREET/COURING Registration Section Division of Corpor Clifton Building 2661 Executive Co	on rations

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13810 Sutton, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 1/12/2011 The Articles of Organization for this Limited Liability Company were filed on L11000005160 Florida document number 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." 4494 Southside Blvd. Ste 102 Enter new principal offices address, if applicable: Jacksonville FL 32216 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 4494 Southside Blvd. Ste 102 Jacksonville FL 32216 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: William R. Huseman, Esq. Name of New Registered Agent: 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

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 Title Title Name 1 Address Type of Action MGRM James R. Olson 4490 Southside Blvd, Ste 100 Remove Jacksonville FL 32216 Bryan Knauss MGRM 4490 Southside Blvd. Ste 100 **✓** Remove Jacksonville FL 32216 MGRM James Robert Olson Trust 4494 Southside Blvd Ste 102 Add Jacksonville FL 32216 Remove Remove ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 13 Dated Signature of a member or authorized representative of a member William R. Huseman Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00