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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:

A. LUNT

JUN 13 2011

EXAMINER

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AND JUNITER OF STATE
SECTION AND STATE
SECTION A

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Sonoma	Group LLC	
•	Name of Lim	ited Liability Company	,
The enclosed Articles of /	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspon	ndence concerning this matter	r to the following:	
		Gary Mann	
		Name of Person	
	Sonoma	Group LLC	
		Firm/Company	7A 8 8
	187	Thoraton Drive	TALLAHASS
	Palm F	Address Sch Gardus FL 33 City/State and Zip Code	_
	E-mall address:	to be used for future annual report notified	
For further information co	oncerning this matter, please	call:	
Paula	Mann	at (561) 722-71	98
Name of	Person	Area Code & Daytime 'I	elephone Number
Enclosed is a check for th	e 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)
	NG ADDRESS:	STREET/COURIES	R ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 (A	Soloma Gyoup Liability Company as it new appe Florida Limited Liability Company	cars on our records.)	
The Articles of Organization for this Limited Li	ability Company were filed on _ 5 5478	1 3 201 and assi	gncd
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability company h	ere:	
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Com	npany," the designation "LLC" or the a	bbreviation
Enter new principal offices address, if applications	able:	30 10 10 10 10 10 10 10 10 10 10 10 10 10	
(Principal office address MUST BE A STREE	T ADDRESS)		**************************************
		33	
Enter new mailing address, if applicable:		T	
(Mailing address MAY BE A POST OFFICE I	<u></u>		
B. If amending the registered agent and/oregistered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	Gary D M 187 Thorny		the new

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, 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 Type of Action **Name Address** 187 Thornton Drive XIAdd □ Remove Paum Bun Grans, to 33418 ☐ Add Remove \square Add Remove $\square \Lambda dd$ 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 Gay D. Mann Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00