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D. BRUCE

JAN 25 2011

EXAMINER

COVER LETTER

TO:	Registration So Division of Co				
SUBJE	CT:	F.K. V	Wilson, LLC		
30 3013	···		ted Liability Company		
		Amendment and fee(s) are sub	_		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
Michael Heidt, Esq.					
			Name of Person		
Law Office of Gable & Heidt Firm/Company					
4000 Hollywood Blvd., Suite 735 South				South	2 m
	Address				
	Hollywood, Florida 33021 City/State and Zip Code				N23 HASS
			,		# 32 M
For furtl	her information o	eoncerning this matter, please c	o be used for future annual report no all:	otification)	STATE OF THE STATE
	Mich	ael Heidt, Esq.	at (954)	966-2501	· · · · · · · · · · · · · · · · · · ·
	Name o	f Person	Area Code & Day	time Telephone Numbe	r
Enclosed	d is a check for the	he following amount:			
₹ 25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certified	ite of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	F.K. Wilson, LLC		
(<u>Name of the Limited Lis</u> (A Flo	ability Company as it now appea orida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabi	lity Company were filed on	1/14/2011	and assigned
Florida document numberL1100000627	<u>"2 </u>		_
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company he	<u>re</u> :	
	F.L. Wilson, LLC		
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Comp	any," the designation "	LLC" or the abbreviation
Enton now principal offices address if applicable			
Enter new principal offices address, if applicable			N _G
(Principal office address MUST BE A STREET A	<u>IDDRESS)</u>		
		<u> </u>	至 1
			AR. SS
Enter new mailing address, if applicable:			<u> </u>
<u>(Mailing address MAY BE A POST OFFICE BO</u>	<u>X)</u>		S
			⊘m 300 :
B. If amending the registered agent and/or		our records, <u>enter 1</u>	the name of the new
registered agent and/or the new registered office	address here:		
Name of New Registered Agent:			20 2 12 1 10 2
New Registered Office Address:			
	Er	nter Florida street ada	lress
_		, 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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			AddRemove
			AddRemove
D. If amend	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necesso	iry.)
_			FIL 11 JAN 24 SECHETARY
 Dated	January 19 20	011 .	T O
	Michael Olen	er or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·
		Michael Heidt	
	Турес	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00