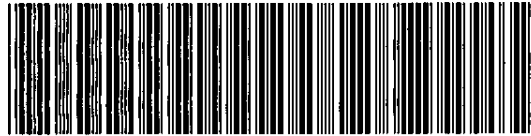


L 11000017461



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12/22/11--01016--005 \*\*25.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
w11-17461  
L11-17461  
A. LUNT  
JAN - 5. 2011

**EXAMINER**  
Office Use Only

2012 JAN -4 PM 4: 12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 29, 2011

GERALD PINTO  
16097 SE 89TH TERRACE  
SUMMERFIELD, FL 34491

SUBJECT: EQUIPMEN ACQUISITION GROUP LLC  
Ref. Number: W11000064261

We have received your document for EQUIPMEN ACQUISITION GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by this name.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 811A00028870



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**EQUIPMENT ACQUISITION GROUP 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 FEB 10/2011 and assigned  
Florida document number L11-17461

2012 JAN -4 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

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)*

JOAN C. HUTCHENS  
9069 SE 136 LOOP  
SUMMERFIELD FL. 34491

Enter new mailing address, if applicable:

*(Mailing address MAY BE A POST OFFICE BOX)*

16097 SE 89TH TERRACE  
SUMMERFIELD FL. 34491

**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:**

Name of New Registered Agent:

JOAN C. HUTCHENS

New Registered Office Address:

9069 SE 136 LOOP

*Enter Florida street address*

SUMMERFIELD Florida 34491  
*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.*

*(Signature)*  
**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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JOAN C. HUTCHENS	9069 SE 136 LOOP SUMMERFIELD FL 34491	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	GERALD PINTO	8820 SE 158TH ST SUMMERFIELD FL 34491	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 12/19 2011

Signature of a member or authorized representative of a member

JOAN C. HUTCHENS

Typed or printed name of signee

2012 JAN 4 PM 4:12  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

FILED