(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<del>.</del>
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
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11/26/12--01030--001 \*\*25.00

K. SALY EXAMINER NOV 28 2012

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: PC	Name of Limit	Charter LLC ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Adrienne	Marks Name of Person	·
	Private ?	Tet Charter L Firm/Company	LC .
	500 East Br	oward Blvd, Suit	r 1870
	Fort Lander	talt FC 33394 City/State and Zip Code	<del></del>
	adrient Gor E-mail address) (10	o be used for future annual report notification	com .
For further information cor	ncerning this matter, please ca	ıll:	
Adrienne Name of F	Marks	at (954) 271-7 Area Code & Daytime Tel	103 ephone Number
The last the state of the state			
Enclosed is a check for the	tottowing 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)

### 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 TO ARTICLES OF ORGANIZATION

12 NOV 26 PM 12: 14

FALLAHASSEE, FLORIDA.

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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

Enter Florida street address

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>	Name	Address	Type of Action
MGR	Jeff Garrity	4808 NE 17# AVER	Add
	J	Oakland Park, Fc, 33334	Remove
·			
MER	Lori Kennedy	231 Lake Court	Add
	J	Laudendalf by the Sea	Remove
		FL, 33308	<del></del>
MGRM	Mark Champian	The Granary, Spendiff, Co	<u>oling</u> Add
		Pochester, Kent, ME38DD, UK	Remove
_			_
	· ·		Add
			Remove
			<u> </u>
	<del></del>		Add
			Remove
			_ <del>_</del>
			Add
			Remove

D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Ple	ease change both Daniel Hurley &
De	rek Damagaard's address to:
	450 NE St St
	Apt 636
<del></del>	Fort Lauderdate, FC, 33301
Dated	
_	Vain
	Signature of a member or authorized representative of a member
_	Adrienne Marks
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00