## 110000241/22

| •                       |                     |           |
|-------------------------|---------------------|-----------|
| (R                      | equestor's Name)    |           |
| A)                      | ddress)             |           |
| (A                      | dd <b>ress)</b>     |           |
| (C                      | ity/State/Zip/Phone | · #)      |
| PICK-UP                 | ☐ WAIT              | MAIL      |
| <b>(</b> B              | usiness Entity Nam  | ne)       |
| (D                      | ocument Number)     |           |
| Certified Copies        | Certificates        | of Status |
| Special Instructions to | Filing Officer:     |           |
| L. SE                   | ELLERS              | }         |
| MAR                     | 2 <b>2</b> 2011     |           |
| EXA                     | MINER               |           |

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11 MAR 21 PH 3: 47
SECRETARY OF STATE

## **COVER LETTER**

| 10:     | Registration Section Division of Corpo |   |   |  |  |
|---------|--|---|---|--|--|
| SHRIE   | ·CT·                                   | Sparkle   | ean Plus, LLC   |  |  |
| SUBJE   | Name of Limited Liability Company      |   |   |  |  |
|         |  |   |   |  |  |
| The en  | closed Articles of Ar                  | nendment and fee(s) are sub   | omitted for filing.   |  |  |
| Please  | return all correspond                  | ence concerning this matter   | to the following:   |  |  |
|         |  |   |   |  |  |
|         | Maria F Chavez  Name of Person         |   |   |  |  |
|         |  |   | Sparklean Plus, LLC   |  |  |
|         | Firm/Company                           |   |   |  |  |
|         | PO Box 2013                            |   |   |  |  |
|         | Address                                |   |   |  |  |
|         | Sarasota, FL 34230                     |   |   |  |  |
|         |  | adm   | City/State and Zip Code inproserv@comcast.net   |  |  |
|         |  | E-mail address: (   | to be used for future annual report r   | otification)   |  |
| For fur | ther information cond                  | cerning this matter, please c                                       | all:  |  |  |
|         |  | F Chavez  | at (_941_)  | 993-6713   |  |
|         | Name of Po                             | erson   | Area Code & Day   | time Telephone Number  |  |
| Enclose | ed is a check for the i                | following amount:   |   |  |  |
|         | .00 Filing Fee [                       | \$30.00 Filing Fee & Certificate of Status                          | \$55.00 Filing Fee & Certified Copy (additional copy is enclo                         | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |
|         | Registration of P.O. Box               | G ADDRESS:<br>on Section<br>of Corporations<br>6327<br>ee, FL 32314 | STREET/COU<br>Registration Se<br>Division of Con<br>Clifton Buildin<br>2661 Executive | rporations<br>g  |  |

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| · · · · · · · · · · · · · · · · · · ·  | Sparklean Plus LLC   |                               |                |               |
|--|--|-------------------------------|----------------|---------------|
| (Name of the Limited L.<br>(A F  | iability Company as it now appeal orida Limited Liability Company) | rs on our records.)           |                |               |
| (  | company)   |                               |                |               |
| The Articles of Organization for this Limited Liab   | oility Company were filed on                                       | February 28, 2011             | _ and assign   | ied           |
| Florida document number L110000246   | 22   |                               |                |               |
| This amendment is submitted to amend the follow  | ring:  |                               |                |               |
| A. If amending name, <u>enter the new name of t</u>  | ne limited liability company he                                    | <u>re</u> :                   |                |               |
| The new name must be distinguishable and end with t 'L,L,C."                                 | he words "Limited Liability Comp                                   | any," the designation "LLC    | C" or the abbi | reviation     |
| Enter new principal offices address, if applicab   | le:  |                               |                |               |
| Principal office address MUST BE A STREET.   | ADDRESS)   |                               |                |               |
|  |  |                               |                |               |
|  |  |                               |                |               |
| Enter new mailing address, if applicable:  |  |                               |                |               |
| Mailing address MAY BE A POST OFFICE BO  | <u> </u>   |                               | <u> </u>       |               |
|  |  |                               |                |               |
|  |  |                               |                |               |
| B. If amending the registered agent and/or registered agent and/or the new registered office |  | our records, <u>enter the</u> | name of t      | <u>he new</u> |
|  | ,  | ·                             | <u> </u>       |               |
| Name of New Registered Agent:  |  | ·                             |                |               |
| New Registered Office Address:   |  |                               | ZAR            |               |
| New Registered Office Address.   | Er   | nter Florida street addre     |                | m             |
|  |  | . Florida ເວັ                 | F S 1 44       |               |
|  | City   | , 1101 Mai                    | Zip Code       |               |
|  |  | 2                             |                |               |

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.

New Registered Agent's Signature, if changing 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> **Type of Action** <u>Name</u> <u>Address</u> **MGRM** George E Mitchell 2745 25th Street ✓ Add
☐ Remove Sarasota, FL 34234 ☐ Add Remove Add Remove ☐ Add Remove  $\Box$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 16 2011 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member Maria F Chavez Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00