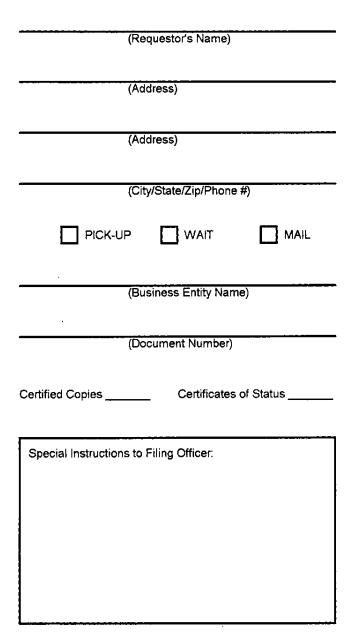
## L11000027457



Office Use Only



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SEUKLIDAL OF STATE ALLAHASSEE, FLORIDA

B. BOSTICK
SEP 1 3 2011
EXAMINER

## **COVER LETTER**

TO: Registration S Division of C				
SUBJECT:	Calibe	er Ocala, LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	pondence concerning this matte	r to the following:	,	
	Daniel P York			
		Name of Person  Franklin Street Real Estate		
	Fra			
		Firm/Company		
	3525 Pied	3525 Piedmont Rd NE, Bldg 8, Suite 420		
		Address		
		Atlanta, GA 30305	1	
	<del> </del>	City/State and Zip Code		
		dyork@fsfp.com		
	E-mail address:	E-mail address: (to be used for future annual report notification)		
For further information	concerning this matter, please	call:	18-4656 PH 1: 2	
	Danny York	at ( 727 ) 51	18-4656	
Name	e of Person	Area Code & Daytime T	elephone Number	
Enclosed is a check for	the 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)	

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 OF

Ca	aliber Ocala, LLC		·
(Name of the Limited Liabi (A Florid	lity Company as it now appe la Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liability	y Company were filed on	March 4, 2011	and assigned
Florida document number L11000027457			
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company h	ere:	
The new name must be distinguishable and end with the v 'L.L.C."	words "Limited Liability Com	pany," the designation "l	LC" or the abbreviatio
Enter new principal offices address, if applicable:			Du
Principal office address MUST BE A STREET AD	DRESS)		SI
			37 N
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			107
			27 27 810
B. If amending the registered agent and/or registered agent and/or the new registered office a	•	our records, enter t	he name of the nev
Name of New Registered Agent:		•	
New Registered Office Address:			
	E	Enter Florida street add	ress
	Cin	, Florida	Zip Code
	City		гір Соае

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 = Managing Member **Type of Action** <u>Title</u> **Address Name** Dollar Generals, JA-I, LLC MGR 208 North Laura Street \_ ✓ Add Remove Suite 900 Jacksonville, FL 32202 ☐ Add ☐ Remove Add 🔲 ☐ Remove Remove ∏Add ☐ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 7 2011 Dated \_\_\_ Signature of a member of authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Daniel P York

Filing Fee: \$25.00