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Office Use Only



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SEGRETARY OF STATE

J. SAULSBERRY EXAMINER JUL 14 2011

COVER LETTER

TO:

Registration Section

Division of C	Corporations				
SUBJECT:	Four Corne	ers Gold and Silver			
		ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corre	spondence concerning this matte	r to the following:			
		Jesse R. Durrum			
		Name of Person			
		Firm/Company	 		
		5286 Fairhaven Ave.	. ,	20 TA'S	
				LL JU	_
		Spring Hill, FI 34608 City/State and Zip Code	·	TAR ASS	-
		urrum78@hotmail.com		405.40 AM	
For further information	E-mail address: (n concerning this matter, please	to be used for future annual report notificate	tion)	9: 1 STATE LORIC	C
	ese R. Durrum	at (352) 23	32-7516	<u>></u> 6	
· Nam	e of Person	Area Code & Daytime T	elephone Number		
Enclosed is a check fo	r 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 Certificate of Certified Co (additional co	f Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER Registration Section Division of Corporation			
		Clifton Building 2661 Executive Cente			

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability	ners Gold and Silver y Company as it now appears on our records Limited Liability Company)	L)
The Articles of Organization for this Limited Liability C Florida document number	Company were filed on May 3, 201	1 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Company," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	20 ZE
		PR L
Enter new mailing address, if applicable:	2108 Mariner Blvd.	L 13 L 13 L ARY (
(Mailing address MAY BE A POST OFFICE BOX)	Spring Hill, FI \$4609	FLO
		9: OR
		D _E 6
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent: Taba		ter the name of the new
New Registered Office Address:	Enter Florida stree	4 11
	Enter riorida siree	a daaress
•	City , Florid	la Zip Code
New Registered Agent's Signature, if changing Registere	•	Lip Coue
TAN WEGGIVER SEAR & DIEBRING OF IT DISBURIER KERNICIE	M Vienur	
I hereby accept the appointment as registered agent	and agree to act in this capacity. I further	er agree to comply with

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, 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>	Address	Type of Action
MGR	Jesse R. Durrum	5286 Fairhaven Ave. Spring Hill, Fl 34608	Add ✓ Remove
MGR	Tabatha D. Rowland	2108 Mariner Blvd. Spring Hill, Fl 34609	Add Remove
			Add Remove
			Add Remove
			AddRemove
		AddRemove	
D. If amend	ing any other information, enter chan	ge(s) here: (Attach additional sheets, if necessa	* '
			ZOII JUL 13 AM 9: SECRETARY OF STATE TALLAHASSEE, FLOR
Dated/V	1AY 5 , 2	σ((9: 16 TATE OR DA
	Signature of a memb	er or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00