Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850) 617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006 Phone : (407)425-7010 Fax Number : (407)425-2747

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dgray WZKSlawfirm.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SPACE COAST OYSTERS, LLC

THAR 14 PH 12: 23
SECHETARY OF STATE

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		, Florida	
New Registered Office Address:		inter Florida street addr	·ess
Name of New Registered Agent:			
B. If amending the registered agent and/or regist registered agent and/or the new registered office addi	ered office address on ress here:	our records, enter th	he name of the new
	-		200
(Mailing address MAY BE A POST OFFICE BOX)			75 1
Enter new mailing address, if applicable:	 		SEE T
			至而另一
(Principal office address MUST BE A STREET ADDR	(ESS)		三三 7
Enter new principal offices address, if applicable:		_	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Lizbility Com	pany," the designation "L	LC" or the abbreviation
A. If amending name, enter the new name of the limi	ted liability company h	ere;	
This amendment is submitted to amend the following:			
Florida document number L11000029623	<u>_</u> .		
The Articles of Organization for this Limited Liability C	ompany were filed on	March 9, 2011	and assigned
(<u>Name of the Limited Liability</u> (A Florida L	imited Liability Company)	
Name of the Yimited Tiesling	AST OYSTERS,	LLC	

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, 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
MGRM	Ernest L. Heether, Jr.	614 Ball Street New Smyrna Beach, Ft 32168	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add (4)
			Add Remove
D. If amen	ding any other information, enter cl	nange(s) here: (Attach additional sheets, if necessary.)	
_			FIL 11 MAR IL SECRETARY SECRETARY
			THE M
Dated	March 14	2011	7: 59
		mber or authorized representative of a member	
	N. Dwayne Gra	ay, Jr., as Authorized Representative yped or printed name of signee	

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Filing Fee: \$25.00