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T. HAMPTON APR 2 8 2011

EXAMINER

COVER LETTER

TO:	Registration So Division of Co					
SUBJECT: 246 SPRINGLINE, LLC						
301301			ted Liability Company			
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ondence concerning this matter	to the following:			
	TIMOTHY M. ZWERNER					
Name of Person						
	ROSSWAY MOORE TAYLOR & SWAN					
Firm/Company						
	2101 INDIAN RIVER BOULEVARD, SUITE 200					
			Address			
	VERO BEACH, FLORIDA 32960					
City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For fur	ther information of	concerning this matter, please o	all:			
	TIMOT	HY M. ZWERNER	at (_772 ₎ 23	31-4440		
	Name of Person Area Code & Daytime Telephone Number		elephone Number			
Enclos	ed is a check for t	he 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 SECRETARY OF STATE OF CORPORATIONS **OF**

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246	SPRINGLINE, LLC	·		
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now app da Limited Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liability Florida document number		MARCH 22, 2011	_and assigned	
This amendment is submitted to amend the following	:			
A. If amending name, enter the new name of the	limited liability company l	<u>1ere</u> :		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Con	npany," the designation "LLC	or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD	DRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, <u>enter the</u>	name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
·	Enter Florida street address			
	City	, Florida	Zip Code	
Non-Portstand August Office August Design	City		zip code	

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 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

Type of Action Address Title <u>Name</u> Member Michael Bottalico 2080 -6th Avenue ☐ Add Vero Beach, Florida 32960 Remove Bottalico Real Estate Appraisals, Inc. 16 Sea Horse Lane ¥Add Member Vero Beach, Florida 32960 Remove ☐ Remove Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 2011 Dated_ Signature of a member of authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00