

# [ 11000036311

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☐ MAIL

(Business Entity Name)

(Document Number)

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11 APR 13 AM 11:45

LETTER FROM THE  
DIVISION OF ORIGINATIONS  
TALLAHASSEE, FLORIDA

11 APR 13 AM 4:52

OFFICE OF THE  
TALLAHASSEE POLICE

APR 13 2011

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** "Duke's Bugs & More L.L.C"  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Reeve

Name of Person

"Duke's Bugs & More L.L.C"

Firm/Company

3119 Louise St.

Address

Tallahassee, FL 32304

City/State and Zip Code

chrisandsarah24@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Stephens

Name of Person

at ( 850 ) 850-210-8099

Area Code & Daytime Telephone 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**

**"Duke's Bugs and More L.L.C."**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**FILED**

11 APR 13 AM 11:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on March 25, 2011 and assigned Florida document number L11000036311.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Duke's Bugz and More LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

3119 Louise St.

Tallahassee, FL 32304

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2814 Kennesaw Pl.

Tallahassee, FL 32303

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Sarah M Reeve

New Registered Office Address:

2814 Kennesaw Pl

*Enter Florida street address*

Tallahassee

Florida

32303

*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 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

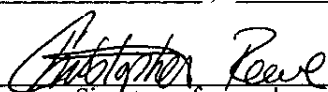
MGRM = Managing Member

| <u>Title</u> | <u>Name</u>          | <u>Address</u>  | <u>Type of Action</u>   |
|--------------|----------------------|---|---|
| MGRM         | Brian T. C. Stephens | 4024 N. Monroe St.<br>Lot M3<br>Tallahassee, FL 32318 | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| MGRM         | Christopher M. Reeve | 2814 Kennesaw Pl.<br>Tallahassee, FL 32303            | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                      |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                      |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                      |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                      |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_, \_\_\_\_\_.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Christopher Reeve  
\_\_\_\_\_  
Typed or printed name of signee