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D. BRUCE

DEC 1 3 2011

EXAMINER

COVER LETTER

	ation Section of Corporations		
SUBJECT:	Tr	oy FD, LLC	
	Name of Lir	nited Liability Company	_
	icles of Amendment and fee(s) are secorespondence concerning this matt		
		J. Bradford Hines, Esq.	
		Name of Person	
J. Bradford Hines, P.A. Firm/Company 116 Sixth Street S.			
Address			
		t. Petersburg, FL 33701	ができ
		City/State and Zip Code	C 12
	bra	d.hines@jbhineslaw.com (to be used for future annual report notification)	<u>a</u> d a □
			F: 03
For further inform	nation concerning this matter, please	call:	STATE STATE
	J. Bradford Hines	at (727) 471-5875	
	Name of Person	Area Code & Daytime Telephone Nun	nber
Enclosed is a che	ck for the following amount:		
▼ \$25.00 Filing	Fee \$30.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	Filing Fee, ficate of Status & fied Copy tional 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	i:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Troy F[(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our rec	cords.)	
The Articles of Organization for this Limited Liability Company Florida document numberL11000046886	were filed onApril 20	, 2011 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and end with the words "Lim" L.L.C."	ited Liability Company," the desi	ignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	9500 Scott Road		
(Principal office address MUST BE A STREET ADDRESS)	Roswell, GA 30076	DEC.	
Enter new mailing address, if applicable:	9500 Scott Road	20 TO	
(Mailing address MAY BE A POST OFFICE BOX)	Roswell, GA 30076	PRIAL S	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:			
	, Florida		
	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 **Title** <u>Name</u> <u>Address</u> Type of Action MGR Fredrico C. Aguirre 95054 Elderberry Lane ☐ Add Remove Fernandina Beach, FL 32034 Fredrico C. Aguirre MGR P. O. Box 16405 ✓ Add Fernandina Beach, FL ☐ Remove MGR Douglas W. Wilcox, II 2504 NW 71st Place ✓ Add Gainesville FL 32653 ☐ Remove ∏ Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) The purpose of this Amendment is to change the principle office address and mailing address of the company; to change the mailing address of Manage

December 8 , 2011 .

Signature of a member or authorized representative of a member

J. Bradford Hines, Attorney

Typed or printed name of signee

Fredrico C. Aguirre and to add Douglas Wilcox as a Manager of the compan

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