L11000047655

(Req	uestor's Name)	
(Addi	ress)	
(Addı	ress)	
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
		:

Office Use Only



200210440192

08/01/11--01007--015 **25.00

2011 AUG -1 PH 2 07.
SECRETARY OF STATE
AHASSEF FLORIDA

C. LEWIS

AUG - 2 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: T9T B\ Name of	SSO UC Limited Liability Company
The enclosed Articles of Amendment and fee(s) are	e submitted for filing.
Please return all correspondence concerning this m	atter to the following:
De	eAnn McMilen Name of Person
	TET BISSO LLC Firm/Company
/	938 Tigertail Boulevard
<u>Do</u>	City/State and Zip Code
Clmc n E-mail addre	nillen@ ++6 iso. com sss: (to be used for future annual report notification)
For further information concerning this matter, plea	ase call:
Dee Ann McMillen Name of Person	at (954) 926-8002 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Statu	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) S60.00 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**

FILEL

2011 AUG -1 PM 28 87

·				*** E
18	BISSO	LLC	SECRETARY OF	STATE
(Name of the Limited)	Liability Company as it a Florida Limited Liability (low appears on our i	records.	FLORIDA
(A)	riorida Limited Liability (Lompany)		
The Articles of Organization for this Limited Lia	bility Company were fil	ed on 4/21	2011 and ass	signed
Florida document number L1100004741				Ü
Tronda document number	 .			
This amandment is submitted to amond the faller	vina.			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of	the limited liability con	npany here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liabi	lity Company," the de	esignation "LLC" or the	abbreviation
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET			· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:				
• • • • • • • • • • • • • • • • • • • •				
(Mailing address MAY BE A POST OFFICE B	<u> </u>	<u> </u>	. -	
D. If amonding the matrix of the state of th	1 1 00 11			
B. If amending the registered agent and/or registered agent and/or the new registered offi	' registered office add ce address here:	ress on our recor	ds, enter the name of	if the new
				
Name of New Registered Agent:	Dee Anr	· McMil	len	
Traine of New Registered Agent.	1020 T:00	rta il Da	10.10	
New Registered Office Address:	1408 Hak	TIME DO	MALYUYU	
	D = 0'0 D	Enter Florida	a street address	{
	DOMING ASC	<u> </u>	Florida <u> </u>	<u>+ </u>
	City		Zip Code	?
New Registered Agent's Signature, if changing Re	gistered 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.

Registered Agent, Signature of New Registered Agent

Page 1 of 2

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> **Address** Type of Action Michael Hielscher □Add Remove Ryan Hampton Christopher A. Mizener MGR Deefinn McMillen William Bisso IV MGR ✓Add Remove MGR Bevin Teichman ⊠Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 27 July Signature of a member of authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00