

L11 000055687

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(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

T. CLINE
JAN -8 2013
EXAMINER

LAW OFFICES

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NASHVILLE, TENNESSEE 37201-1638

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OF COUNSEL

January 4, 2013

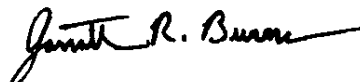
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Name Change/Dissolution

Dear Sir or Madam:

I enclose Articles of Amendment to Articles of Organization and Articles of Dissolution for AED Rebate Center, LLC, along with a check in the amount of \$50 for the combined filing fee. Once the documents have been recorded, please return them to me within the enclosed self-addressed stamped envelope. If you should have any questions feel free to contact me. Thank you for your assistance.

Very truly yours,



Jonathan R. Burns

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **AED Rebate Center, LLC**
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:

Jonathan R. Burns

Name of Person

Watkins & McNeilly, PLLC

Firm/Company

214 Second Ave N, Suite 300

Address

Nashville, TN 37201

City/State and Zip Code

jburns@watkinsmcneilly.com

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

For further information concerning this matter, please call:

Jonathan R. Burns

Name of Person

615 255-2191

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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AED Rebate Center, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/10/2011 and assigned
Florida document number L11000055687.

This amendment is submitted to amend the following:

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

Spencer Rebate Center, 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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TALLAHASSEE, FLORIDA

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:

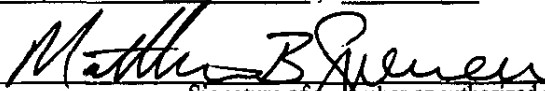
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated December 31, 2012.



Signature of a member or authorized representative of a member

Matthew B. Spencer

Typed or printed name of signee

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Filing Fee: \$25.00

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