L11000056837

(Re	questor's Name)	
(146	Sacotor a Harrier	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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2011 JUN 30 PM 35 48
SECRETARY OF STATE

C. LEWIS

JUL -1 2011

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor		S pl	,
SUBJECT: R	aas hhc	· •	
· (Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	,
Please return all correspo	ndence concerning this matter	to the following:	
	Lora	A. Fillyaw Name of Person	
	Riggs	Firm/Company	
	12941 L	Ower River Blud	
	Orlando	City/State and Zip Code	
	Lora fil	lyaw a gnail. Come obe used for future annual report notification	on)
For further information co	oncerning this matter, please ca	all:	
LOXA_ Name of	Person	at (<u>407</u>) <u>951-461</u> Area Code & Daytime Te	lephone Number
Enclosed is a check for th	ne 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

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2011 JUN 38 PM 95 94 SECRETARY OF STATE ed Liability Company as it now appears on our recortian LAHASSEE, FLORIDA (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _ Florida document number L11000056837 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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

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.

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> Name Address Type of Action Lora A. Fillyaw 12941 Lower River Orlando, Fl. 32828

JERE RICHARD RIGGS Same as above 12941 Lower River Blvd. Orlando, Fl. 32828 Add Remove ☐ Add Remove \square Add Remove \square Add 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

Page 2 of 2

Filing Fee: \$25.00