L11000060604

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SECRETARY OF STATE

N/c

COVER LETTER

, , ,	SO VER EE TER
TO: Registration Section Division of Corporations	&
SUBJECT: Oronder Oronder Name of Limit	ed Liability Company
The enclosed Articles of Amendment and fee(s) are sub-	mitted for filing.
Please return all correspondence concerning this matter	to the following:
Sett Wi	Name of Person
Dala	O Bosego to Golf Asset Adusors
10401 Deer	Address Shed., 8te 2130
Jackson Surneh (City/State and Zip Code 2) 90 fasset advisors.com gbe lised for future annual report notification)
E-mail address: (to () For further information concerning this matter, please ca	
	at 3908-416-3090
Name of Person	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

V	13 OCT LED	
TÁ	SECRETARY OF STATE	
1 01	ir records. F. F. TATE	

The Articles of Organization for this Limited Liability Company were filed on $\frac{5/23/11}{2}$ and assigned Florida document number $\frac{L/100060604}{2}$.

This amendment is submitted to amend the following:

A. If amending name, <u>enter the new name of the lim</u>	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."		," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Ente	r Florida street 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 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 · Name 1 **Address** Type of Action Carnace Orender 1040/ Devarod Pak Blad Add
Ste 2130

Tacksamble Pl 32256 Remove MER Kamli Abdulghani 10401 Dessumed Park Blud. Add
Ste 2130

Jacksonville, Pr 32256

Rem Remove Remove

Remove

	other information, enter change(s) here: (Attach additional sheets, if necessary.
•	
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00