LIION	1066187
(Requestor's Name) (Address) (Address)	400212516464
(City/State/Zip/Phone #)	09/26/1101042026 **25.00
(Document Number) Certified Copies Certificates of Status	FILED 2011 SEP 26 AM 8: 26 SECRETARY OF STATE TALLAHASSEE, FLORIDA
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COVER LETTER

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Division of Corporations aw SUBJECT: IAG 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: Stephen Betros Name of Person Itlaw Hunting L Wedge wood Rd L **SEP 26** KSCNVILLE, FL City/State and Zip Cod Stevil Betros @ gmail com E-mail address: (to be used for future annual report notification) AM 8: For further information concerning this matter, please call: 20 ephen at (<u>904)</u><u>545-7377</u> Area Code & Daytime Telephone Number etros

Enclosed is a check for the following amount:

\$25.00 Filing Fee

TO:

Registration Section

\$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 Taltahassee, 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

Out Law Hunting 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 06/07/2011 and assigned Florida document number 11000066187.

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)				
		ALL	201	
	+	AHA	SEF	Π
Enter new mailing address, if applicable:		ASS	Ň	
(Mailing address MAY BE A POST OFFICE BOX)		E C		
		FLOS	3	, , ,
		R	œ	**************************************

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	rida 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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Stephen M. Betros Jr	Jackson, 11e, FL 32259	Add Remove
<u></u>			Add Remove
	<u></u>	·	Add Remove
			Add Remove
·			Add Remove
			Add Remove
D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
-			FILE 2011 SEP 26 AM
_		LORIO	
Dated	September 23, 201 SA	par h	σī
		authorized representative of a member	
	Stephen f	<u>printed name of signee</u>	
		Page 2 of 2	

Filing Fee: \$25.00