L11000071333

Office Use Only



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SECRETARY OF STATE
SHAPASSEE, FLORID

J. BRYAN

AUG 1 8 2011

EXAMINER

COVER LETTER

TO:	Registration Solution of Con			
SUBJE	CT: The Haime Estate, LLC			
		Name of Limi	ted Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
			Bradley Haime	
	-		Name of Person	
The HaincEstate, Bradley Haime, LLC				
			Firm/Company	製ジー
	12898 Timber Ridge Drive			FILED MII: 26 SECRETARY OF STATE SECRETARY OF FLORI
			Address	
			77 S	
			Fort Myers, FL 33913	
			City/State and Zip Code	The state of the s
	bradhaime@gmail.com			
		E-mail address: (t	o be used for future annual report notification	ation)
For furth	ner information of	concerning this matter, please c	all:	
	Br	adley Haime	at (239) 8	48-2150
		of Person	Area Code & Daytime	
Enclosed	d is a check for t	he following amount:		
\$25.0	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 OF

THE THINK The Haime Estate, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 6/20/2011 The Articles of Organization for this Limited Liability Company were filed on and assign L11000071333 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Bradley Haime, 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: 12898 Timber Ridge Drive Fort Myers, FL 33913 (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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

Zip Code

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		
			Add		
			Remove		
	 		Add Add		
			TO TO TO		
			Tely dd		
			Add Remove		
					
	 		Add Remove		
			∏Add		
			Remove		
D. If amer	nding any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)		
_					
_					
_					
	1 1 1				
Dated	August 13	, <u>doll</u>			
	Signature of	member or authorized representative of a member			
		Bradley Haime Typed or printed name of signee			

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Filing Fee: \$25.00