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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO:	Registration Section Division of Corporations	D. TUNNICLIFFE LLC			
SUBJE	ECT:	Name of Limited Liability Company			
The end	closed Articles of Amendment	nd fee(s) are submitted for filing.			
Please	return all correspondence conc	rning this matter to the following:			
		DANIEL TUNNICLIFFE			
	<u> </u>	Name of Person	***************************************		
		D. TUNNICLIFFE LLC			
		Firm/Company			
	11951 CHAMPIONS GREEN WAY #401				
	Address				
	FORT MYERS, FLORIDA 33913				
		City/State and Zip Code			
		vbkiwi@gmail.com			
		E-mail address: (to be used for future annual report notification)			
For fur	ther information concerning the	matter, please call:			
	Daniel Tunnich	at the second se			
	Name of Person	Area Code & Daytime Telephone	Number		
Enclos	ed is a check for the following	mount:			
\$25	5.00 Filing Fee S30.00 Certi	icate of Status Certified Copy (additional copy is enclosed)	0.00 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 D. TUNNICLIFFE LLC

FILED
12 OCT 22 PM 2: 34
PARMETARY DE STATE

	TALLAHASSEE, FLORIDA			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.)			
(A Florida Limited	JUNE 28 2011			
The Articles of Organization for this 1000075351 ty Company	y were filed on and assigned			
Florida document number <u> 4 11 0000 75 3 51</u>	-			
Total document named				
This amendment is submitted to amend the following:				
•				
A. If amending name, <u>enter the new name of the limited lial</u>	<u>pility company here</u> :			
The new name must be distinguishable and end with the words "Lim 'L.L.C."	nited Liability Company," the designation "LLC" or the abbreviation			
	11951 CHAMPIONS GREEN WAY #401			
Enter new principal offices address, if applicable:	FORT MYERS, FLORIDA 33913			
(Principal office address MUST BE A STREET ADDRESS)				
	11951 CHAMPIONS GREEN WAY #401			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)	FORT MYERS, FLORIDA 33913			
D. If amonding the registered agent and/or registered a	ffice address on our records, enter the name of the new			
registered agent and/or the new registered office address her				
Name of New Registered Agent: D. TUNNIC	CLIFFE			
•				
New Registered Office Address: 11951 CHA	CHAMPIONS GREEN WAY #401 Enter Florida street address			
·	ORT MYERS , Florida 33913 City Zip Code			
New Registered Agent's Signature, if changing Registered Agent	,			
New Registered Agent's Signature, in changing Registered Agent	<u></u>			
l hereby accept the appointment as registered agent and ag	ree to act in this capacity. I further agree to comply with			
	plete performance of my duties, and I am familiar with and			
accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic	provided for in Chapter 508, F.S. Or, if this document is eaddress. I hereby confirm that the limited liability			
company has been notified in writing of this change	2111			

Page 1 of 2

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Mai MGRM = M	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action Add Remove
			Remove
			d Remove
			d Remove
			d d tomove
			
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	12 OCT 22 PH 2: 34 SLUNCIJARY OF STATE TALLAHASSEE, FLORIDA.
Dateu		or authorized representative of a member	
	AG.	NIEC TUNNICLIFFE	

DANIED TO CHANGE FOR THE

Page 2 of 2

Filing Fee: \$25.00