L11000085782

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700210426047

07/29/11--01010--003 **25.00

DIVISION OF CORPORATION



COVER LETTER

egistration So ivision of Co	ection rporations		•	
٠.	Black Jack Custom	Cycles of Bay County, I	LLC	
•				
ed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
rn all correspo	ondence concerning this matter	r to the following:		
		Steven Applebaum		
		Name of Person	,	
			••	
	·	Firm/Company		
PO Box 9454				
Address				
	Pana	ma City Beach, FL 32417		
		City/State and Zip Code		
	E-mail address: (to be used for future annual report notifi	cation)	
information c	concerning this matter, please o	call:		
Steve	en Applebaum	at (850)	235-3004	
Name of Person		Area Code & Daytime Telephone Number		
			·	
a check for the	he following amount:			
Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 10	
	information of Stev	Pana E-mail address: (information concerning this matter, please of Steven Applebaum Name of Person s a check for the following amount: Filing Fee \$30.00 Filing Fee &	Black Jack Custom Cycles of Bay County, Name of Limited Liability Company ed Articles of Amendment and fee(s) are submitted for filing. m all correspondence concerning this matter to the following: Steven Applebaum Name of Person Firm/Company PO Box 9454 Address Panama City Beach, FL 32417 City/State and Zip Code E-mail address: (to be used for future annual report notifit information concerning this matter, please call: Steven Applebaum Name of Person Area Code & Daytime at check for the following amount: Filing Fee \$\square\$\$\$30.00 Filing Fee & Certified Copy	

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

Law Office of Brian D. Hess

9108 Front Beach Road Post Office Box 9454 Panama City Beach, Florida 32417

Brian D. Hess Steven L. Applebaum Phone (850) 235-3004 FAX (850) 235-1124

July 27, 2011

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Black Jack Custom Cycles of Panama City Beach, LLC Florida document number L11000085782

To whom it may concern:

Enclosed please find an Article of Amendment in the above referenced matters along with a check in the amount of \$25.00 to cover the cost.

Please send a file stamped copy in the addressed stamped envelope I have provided. Thank you for your cooperation.

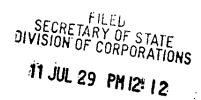
Sincerely,

Lisa M. Carstens

Assistant to Steven L. Applebaum

SLA/lmc enclosure

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Black Jack Cu	stom Cycles of Bay Co	ounty, LLC
(A Flo	ability Company as it now appea orida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liabi	• • •	July 26, 2011 and assigned
Florida document numberL1100	10085782.	
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company her	<u>re</u> :
Black Jack Custor	m Cycles of Panama City E	Beach, LLC
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Compa	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
-	En	ter 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = N	lanaging Member	MGRM = Managing Member							
<u>Title</u>	<u>Name</u>	Address	Type of Action						
			Add Remove						
			Add Remove						
			Add Remove						
			Add Remove						
			□Add □Remove						
	.		Add Remove						
D. If amend	ling any other information, enter change	s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE DIVISION OF CORPORATIONS 11 JUL 29 PM 121 12						
	Ronald D. Typed or	authorized representative of a member Curtis printed name of signee							

Page 2 of 2

Filing Fee: \$25.00