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EXAMINER

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COVER LETTER

TO: Registration S Division of Co	Section orporations				
SUBJECT:	WIRED IN	THE WOODS, LLO	C		
30 2 02011		ited Liability Company		-	
The enclosed Articles o	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	condence concerning this matte	r to the following:			
		JOHN HURTADO, JF	₹	1	
•		Name of Person			
	WIRI	ED IN THE WOODS,	LLC		
	, <u> </u>	Firm/Company			
	•	POB 11404			
		Address			
		NAPLES, FL 34101		=	
	···	City/State and Zip Code		2011 OCT 25 SECREMARY ALLEANASSE	
				₩ 6 5	e de la
	E-mail address: (to be used for future annual rep	port notification)	ARY SSE	F
For further information	concerning this matter, please	call:		(T) □ 全	FILE
JOHN	N HURTADO, JR	at (239)	877-7872	Sa	
Name	of Person	Area Code &	Daytime Telephone Numb	oer Dim 8	
Enclosed is a check for	the following amount:				
2 \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is e	Certific enclosed) Certific	filing Fee, cate of Status & ed Copy onal copy is enclose	ed)
	LING ADDRESS: tration Section	STREET/0 Registratio	COURIER ADDRESS:		
Divisi	on of Corporations Box 6327		Corporations		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WIRED IN THE	WOODS, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liability Company	were filed on8/18	3/2011 and assigned
Florida document numberL11000095220		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the	designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	8605 CHAMPIONS	POINTE
(Principal office address MUST BE A STREET ADDRESS)	UNIT 104	7 s 2
	NAPLES, FL 34113	
Enter new mailing address, if applicable:		Z5 SSE
(Mailing address MAY BE A POST OFFICE BOX)		The B III
		후류 2
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		rds, enter the name of the nev
registered agent and/or the new registered office address ner	<u>c</u> .	
Name of New Registered Agent:	•	
New Registered Office Address:		
	Enter Florid	da 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

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	I = Managing Member		•
Title	<u>Name</u>	Address	Type of Action
			Add Remove
<u>. </u>			Add Remove
			Add Remove
			Add Remove
			Add Remove
			G Ald
D. If an	nending any other information, enter c	change(s) here: (Attach additional sheets, if necessar)	
	OWNERS/MEMBERS ARE AS	FOLLOWS:	× € M S ⊕ O
	JOHN HURTADO, JR 50% INTE	EREST Ş	
	CHRISTINE HURTADO 50% IN		<u> </u>
Dated _	OCTOBER 17	2011 ember or authorized representative of a member	
	Vibrialist Of a life	JOHN HURTADO JR	
	7	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00