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COVER LETTER

TO:	Registration Section Division of Corporations			
		_	,	

SUBJECT: Farrell& Pate/ LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas 5. Greene III

Name of Person

The Greene Law Firm Firm/Company

135 St. George Place

Address Athens, GA 30606

City/State and Zip Code

tomgreene 440 3 mail. com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas E-Gilene III at 706 207-0401

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 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 effclosed)

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**

raircil & Pate			
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	ny as it now appears on our records iability Company)	<u>i.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number 4/1000/11/333	were filed on $\frac{9/28/26}{2}$	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi Wesley J. Forcell, L. L. The new name must be distinguishable and end with the words "Limit			
The new name must be distinguishable and end with the words "Limit "L.L.C."		ion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	No change		
(Principal office address MUST BE A STREET ADDRESS)		Din D	
		31 8 7	
Enter new mailing address, if applicable:	No change		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		nter the name of the new	
Name of New Registered Agent: No	change		
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	
	Enter Florida street address		
	, Florie	la Zip Code	
New Registered Agent's Signature if changing Registered Agent:	City	Zip Code	

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 nechange 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 NA panje or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Address** Type of Action <u>Title</u> <u>Name</u> Remove Remove Add Remove DORID! Remove Add Remove Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
**	
Dated 8-20-13 Struit	
Signature of a member or authorized representative of a member Thomas 6.6 (etn) 111	
Page 3 of 3 Filter From \$25.00	l as
power of	
Refiled 10-15-13 attorn	d ingresen member
Amendment adopted by member	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
8/20/13 -	Co Co
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