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(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

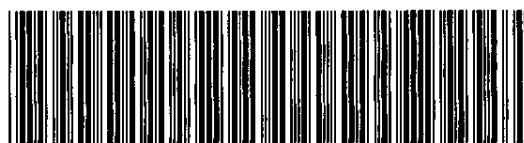
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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T. CLINE

APR 10 2012

EXAMINER

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Townie Holdings LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Peter Barakett

Name of Person

Barakett Capital LLC

Firm/Company

500 Fifth Avenue South, Suite 509,

Address

Naples, FL 34102

City/State and Zip Code

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

For further information concerning this matter, please call:

Peter

Name of Person

at ( 239 )

434-8393

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 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

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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Townie Holdings LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 3, 2011 and assigned  
Florida document number L11000112978.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

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:**

**(Principal office address MUST BE A STREET ADDRESS)**

500 Fifth Avenue South, Suite 509, Naples, FL  
34102

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

500 Fifth Avenue South, Suite 509, Naples, FL  
34102

**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 Office Address:

Enter Florida street address

Florida

City

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**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 = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	John C. Molloy, Jr.	18 Winding Hill Road Northwood, NH 03261	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Peter Barakett	500 Fifth Avenue South, Suite 509 Naples, FL 34102	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA

Dated April 3, 2012

P. Barakett  
Signature of a member or authorized representative of a member

Peter Barakett  
Typed or printed name of signee

TOWNIE HOLDINGS LLC

Consent of Sole Member

April 3 2012

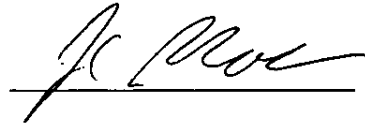
I, Peter Barakett, of Naples Florida, the sole member of Townie Holdings LLC, a Florida limited liability company (the "Company"), hereby consent to the following actions.

1. To accept the resignation of John C. Molloy as the Company's Manager and appoint myself as the Company's managing member.
2. To admit Bernadette Barakett of Naples Florida as a member of the Company.
3. To approve the limited liability company agreement attached hereto as the limited liability company agreement of the Company.
4. To change the Company's Principal Office and Mailing Address Office to 500 5<sup>th</sup> Avenue South, Suite 509, Naples FL 34102.
5. To approve such filings and other disclosures as may be required to be made with the Secretary of State of the State of Florida to record or effectuate the foregoing.

A handwritten signature in black ink, appearing to read "P. Barakett", written over a horizontal line.

Peter Barakett

I, John C. Molloy, hereby resign as the Manager of Townie Holdings LLC effective April 3, 2012.

A handwritten signature in black ink, appearing to read "J. C. Molloy", is written over a horizontal line.

John C. Molloy