

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·
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G. MCLEOD

SEP 18 2012

EXAMINER



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COVER LETTER

TO: Registration Division of 0	i Section Corporations					
SUBJECT:						
SUBJECT: PICTURE YOU, LLC Name of Limited Liability Company						
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.				
Please return all corre	spondence concerning this matter	to the following:				
	-	ROGER CISKIE				
		Name of Person				
PICTURE YOU, LLC						
	Firm/Company					
	2316 SOUTHWOOD DRIVE					
		Address				
	TH	E VILLAGES, FL 32162	2			
	City/State and Zip Code					
roger_ciskie@comcast.net E-mail address: (to be used for future annual report notification)						
For further information	on concerning this matter, please of	•				
	ROGER CISKIE	at (352)	446-1870 aytime Telephone Number			
Nan	ne of Person	Area Code & D	aytime Telephone Number			
Enclosed is a check for	or the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is end	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
· MA	ILING ADDRESS:	STREET/CO	DURIER ADDRESS:			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PICTURE YOU, LLC				
(Name of the Limited I	Liability Company as it now apper Florida Limited Liability Company	ears on our records.)			
(A)	Torida Emitted Elability Company	,			
The Articles of Organization for this Limited Lia	bility Company were filed on	October 11, 2011	and assigned		
Florida document number L110001162	248				
	· · · · · · · · · · · · · · · · · · ·				
This amendment is submitted to amend the follow	wing:				
	_				
A. If amending name, enter the new name of	<u>the limited liability company h</u>	ere:			
		N. 1 1 1 11 11 11 11 11 11 11 11 11 11 11	On 1 11 11		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designation "Ll	.C" or the abbreviation		
L.L.C.					
Enter new principal offices address, if applica	hle:				
• • • • • • • • • • • • • • • • • • • •			1·0 -		
(Principal office address MUST BE A STREET	<u> ADDRESS)</u>		<u> </u>		
			APE SE		
		•	3>=1		
			SS 7		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
Intuing united MAT BEAT OUT OF THEE B					
			OR I		
			₽m #		
B. If amending the registered agent and/or	r registered office address on	our records, enter th	e name of the new		
registered agent and/or the new registered off					
	D 0: 1:				
Name of New Registered Agent:	Roger Ciskie				
	2316 Southwood Drive				
New Registered Office Address:					
	Enter Florida street address				
	The Villages	Florida	32162		
	City	, Florida	Zip Code		
	City		sip conc		

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, thereby 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

Type of Action <u>Title</u> <u>Name</u> <u>Address</u> MGR Steven J. Ciskie 2316 Southwood Drive The Villages, FL 32162 ✓ Add Remove ☐ Add Remove ☐ Remove Remove ___Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member ROGER CISKIE Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00