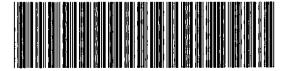
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B. BOSTICK
'JAN 27 2012
EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	CT:	MON	NDYER, LLC	
			ited Liability Company	
	•			
The end	closed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please :	return all corresp	ondence concerning this matte	er to the following:	
			Name of Person	
			Mondyer, LLC	
			Firm/Company	
			5515 S. Tamiami Trail	
			Address	
			Sarasota, FL 34231	12 JI
			City/State and Zip Code	JAN 26
			rcl@rvolaw.com	
		E-mail address: (to be used for future annual report notifica	
For furt	her information o	oncerning this matter, please	call:	2:5
		C. Leithauser, Jr.	a. (24-3322 D
	Name o	f Person	Area Code & Daytime T	elephone Number
Enclose	d is a check for th	ne following amount:		
₹ \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	MONDYER,			
· (Name of t	he Limited Liability Company as (A Florida Limited Liabili	it now appears ity Company)	on our records.)	·
The Articles of Organization for this	Limited Liability Company were	e filed on	October 25, 2011	and assigned
Florida document numberL	11000121450			
This amendment is submitted to ame	and the following:			
A. If amending name, enter the ne	w name of the limited liability	company here	•	
The new name must be distinguishable "L.L.C."	and end with the words "Limited L	iability Compar	ny," the designation "LL	C" or the abbreviation
Enter new principal offices addres	s, if applicable:		5 0	7
(Principal office address MUST BE	A STREET ADDRESS)		, , , , , , , , , , , , , , , , , , ,	<u></u>
			75.	LS tome
			in the	
Enter new mailing address, if appl	icable:			
(Mailing address MAY BE A POST	OFFICE BOX)			
B. If amending the registered a registered agent and/or the new re		address on o	ur records, <u>enter the</u>	name of the new
Name of New Registered A	gent: Robert C. Leitha	user, Jr.		
New Registered Office Add	Iress: 5515 S. Tamian	ղi Trail		
		Ente	er Florida street addre	SS .
	Sara	esota	, Florida	34231
	Cit	y		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 = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Terry Dyer	5515 S. Tamiami Trail Sarasota, Fl. 34231	Add Remove
MGR	Robert C. Leithauser	5515 S. Tamiami Trail Sarasota, Fl. 34231	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if neces	sary.)
			12 JAN
 Dated	January 19		SEE SEE
	Q.L.	A C. S.	2: 58 CRIDA
	Ro	obert C. Leithauser, Jr. ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00