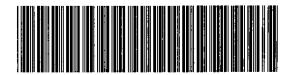


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J. BRYAN

JAN 26 2012

EXAMINER

COVER LETTER

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			<u> </u>	
	Name of Person			
McHa	rdy Law And Associat	es		
	Firm/Company		_	
A3	37 Sea Grane Drive			
43			_	
	Addiess		7 2	
La	uderdale By the Sea		SEC SEC	
	City/State and Zip Code			1
Semch	ardy@mchardylaw.co	om	ASS 25	
E-mail address: (to	be used for future annual report	t notification)	MO P	Γ
concerning this matter, please ca	11:			_
rmine Coletta	at (954)	332 1257	RAE 3	
of Person		aytime Telephone Num	ber	
the following amount:				
\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Certifi closed) Certifi	icate of Status & ied Copy	
	Name of Limit f Amendment and fee(s) are substantial formulation of the substantial fee (s) are subst	Address Lauderdale By the Sea City/State and Zip Code Semchardy@mchardylaw.cc E-mail address: (to be used for future annual report concerning this matter, please call: at (954) Area Code & D the following amount: \$30.00 Filing Fee & Certificate of Status Certificate of Status Address Lauderdale By the Sea City/State and Zip Code Semchardy@mchardylaw.cc at (954) Area Code & D \$55.00 Filing Fee & Certified Copy	Name of Limited Liability Company f Amendment and fee(s) are submitted for filing. bondence concerning this matter to the following: Stefan McHardy Name of Person McHardy Law And Associates Firm/Company 4337 Sea Grape Drive Address Lauderdale By the Sea City/State and Zip Code Semchardy@mchardylaw.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: at (954) 332 1257 Area Code & Daytime Telephone Num the following amount: \$\int \frac{\sqrt{330.00}}{\sqrt{100}} \text{Filing Fee & \$\infty \frac{\sqrt{60.00}}{\sqrt{100}} \text{Certified Copy} Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (certified Copy (certified Copt))	Name of Limited Liability Company If Amendment and fee(s) are submitted for filing. Stefan McHardy Name of Person McHardy Law And Associates Firm/Company 4337 Sea Grape Drive Address Lauderdale By the Sea City/State and Zip Code Semchardy@mchardylaw.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: at (954) 332 1257 Area Code & Daytime Telephone Number the following amount: \$\int 330.00 \text{ Filing Fee & Certificate of Status & Certified Copy} \$\int 860.00 \text{ Filing Fee, Certificate of Status & Certified Copy} \$\int 860.00 Filing Fee, Certificate of Status &

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**

Mchardy Law and A	ssociates, L	.LC	
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears bility Company)	on our records.	
The Articles of Organization for this Limited Liability Company w	ere filed on	11/17/2011	and assigned
Florida document numberL11000130997			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	ty company here	:	
The McHardy Law	The state of the s		
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Compar	y," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		-i	s 201
-			ECE 2
		HAS	N 25
Enter new mailing address, if applicable:			, —< <u></u>
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>	AM II:
-		, , , , , , , , , , , , , , , , , , ,	
		Ī	5 ₹ 3
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on ou	ır records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	er Florida street addi	ress
	<u>.</u>	, 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 = M MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Damara
D. If amen	ding any other information,	enter change(s) here: (Attach additional sheets, if	necessary Sp. HAS
_ _ _			AN 25 AM II: 31 RETARK OF STATE ANSSEE FLORIDA
 Dated	January 23		
	Signature	e of a member of authorized representative of a member	
		Stefan E. McHardy Typed or printed name of signee	

Page 2 of 2

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