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| Special Instructions to F | iling Officer: | | | |
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Office Use Only

EXAMINER



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SEGRETABLY OF STATE ALLAHASSEE FEI ORING

COVER LETTER

TO:

Registration Section

| Division of | Corporations |
|----------------------|--|
| SUBJECT: | STEIMER BEHEIR LLC |
| SUBJECT, | Name of Limited Liability Company |
| | s of Amendment and fee(s) are submitted for filing. |
| riease return an con | espondence concerning this matter to the following: |
| | JANNA STEIMER |
| | Name of Person |
| | Firm/Company |
| | 1410 S NARCOOSSEE RD |
| | Address |
| | SAINT CLOUD, FL 34771 City/State and Zip Code |
| | hkarman@cfl.rr.com E-mail address: (to be used for future annual report notification) |
| For further informat | on concerning this matter, please call: |
| RIC | HARD D. DANLEY at (407) 892-1002 |
| | ne of Person Area Code & Daytime Telephone Number |
| Enclosed is a check | or the following amount: |
| \$25.00 Filing Fed | S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Re Di P.0 | AILING ADDRESS: gistration Section vision of Corporations Division of Corporations Division of Corporations Division of Corporations Division of Corporations Clifton Building Lahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | MER BEHEIR LLC | | | |
|--|---|--------------------------|---------------------------------------|--|
| (<u>Name of the Limited Liabi</u> l (A Florid | lity Company as it now appears la Limited Liability Company) | on our records.) | | |
| The Articles of Organization for this Limited Liability | Company were filed on | 11/22/11 | and assi | gned |
| Florida document number L11000132953 | • | | | |
| This amendment is submitted to amend the following: | : | | | |
| A. If amending name, enter the new name of the li | mited liability company here | : | | |
| STEI | MER BEHEER LLC | | | |
| The new name must be distinguishable and end with the v "L.L.C." | words "Limited Liability Compan | y," the designation " | LLC" or the at | breviation |
| L.L.C. | | | | |
| Enter new principal offices address, if applicable: | | | | |
| (Principal office address MUST BE A STREET AD | DRESS) | | | |
| | | | | |
| | | | | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | |
| | <u>- · </u> | | | |
| | | | | |
| B. If amending the registered agent and/or reg | | ır records, <u>enter</u> | the name of | the new |
| registered agent and/or the new registered office a | ddress here: | | 100 P | control : |
| | • | | | ************************************** |
| Name of New Registered Agent: | | | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | 3 |
| New Registered Office Address: | | | | m |
| new registered Office Address. | Ente | r Florida street ad | | U |
| | | T212.3 | REA R | |
| | City | , Florida | 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> <u>Name</u> Type of Action Address _ ☐ Add Remove ☐ Add Remove ☐ Add Remove □Add Remove □Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ____ DECEMBER 20 2011 Signature of a member or authorized representative of a member JANNA STEIMÉR Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00