L11000141368

| (Requestor's Name) | | | | |
|--|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE

C. LEWIS

MAR 2 8 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 28, 2012

DEREK FREY / CARNAC INVESTMENT ADVISORS LLC 351 AHERN STREET ATLANTIC BEACH, FL 32233

SUBJECT: CARNAC INVESTMENT ADVISORS LLC

Ref. Number: L11000141368

We have received your document for CARNAC INVESTMENT ADVISORS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 012A00010458

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

| TO: | Registration Section |
|-----|--------------------------|
| | Division of Corporations |

| SUBJECT: | Carnac Inves | tment Advisors LLC | | | | |
|--|--|---|--|--|-------------------------|-----------------------------------|
| Name of Limited Liability Company | | | | | | |
| | | | | | | |
| The enclosed Articles o | f Amendment and fee(s) are sub | mitted for filing. | | | | |
| Please return all corresp | ondence concerning this matter | to the following: | | | | |
| | | Derek Frey | | | | |
| Name of Person | | | | | | |
| Carnac Investment Advisors LLC | | | | | | |
| Firm/Company | | | | | | |
| 351 Ahern st. | | | | | | |
| | | | | | | |
| | Atla | antic Beach, FL 32233 | | | | |
| City/State and Zip Code carnacinvestmentadvisorsllc@gmail.com E-mail address: (to be used for future annual report notification) | | | | | | |
| | | | | | For further information | concerning this matter, please ca |
| | Derek Frey | at (904)3 | 12-1032 | | | |
| Name of Person Area Code & Daytime Telephone Number | | 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Carnac Investment Advisors LLC

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SECRETARY CT

1

(Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company) 12/16/2011 The Articles of Organization for this Limited Liability Company were filed on _____ and assigned L11000141368 Florida document number _____ 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." 351 Ahern St. Enter new principal offices address, if applicable: Atlantic Beach, Florida (Principal office address MUST BE A STREET ADDRESS) 32233 351 Ahern St. Enter new mailing address, if applicable: Atlantic Beach, Florida (Mailing address MAY BE A POST OFFICE BOX) 32233 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: Derek Frey Name of New Registered Agent: 351 Ahern St. New Registered Office Address: Enter Florida street address Atlantic Beach __, Florida ___ City

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 Changina 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 |
|--------------|------------------------------------|---|--|
| MGRM | Matthew A Bradbard | PO Box 41-6536 Miami Beach, FL 33141 | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | AddRemove |
| | | | Add Remove |
| D. If ame | nding any other information, enter | change(s) here: (Attach additional sheets, if necess | sary.) |
| - - | | | FIL 12 APR 13 SECRETAR |
| Dated | 4-09- | 2012. | 13 PH 4: 24 ARY OF STATE ASSEE, FLORIDA |
| | Signature of a r | Derek Frey Typed or printed name of signee Page 2 of 2 | |
| | <u>~</u> | rage a or a | |

Filing Fee: \$25.00