L1200001553

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B. KOHR

SEP 2 1 2012

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor		•	*
SUBJE	ECT:	VINEDY MA	ANAGEMENT,LLC	
		Name of Limit	ted Liability Company	SCO COLOR
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	R SEP 20 PM 3: 59
Please	return all correspo	ondence concerning this matter	to the following:	ري من
		K	WOK, HELEN EMILY	
			Name of Person	
			Firm/Company	
		41	41 S FLORIDA AVE	
			Address	
		L	AKELAND,FL 33813	
	•		City/State and Zip Code	
		E-mail address: (to be used for future annual report notifica	tion)
For fur	ther information of	concerning this matter, please c	all:	
		VOK, HELEN	at (863_)64 Area Code & Daytime T	47 3000 elephone Number
Enclos	ed is a check for t	the following amount:		
▼ \$25	5.00 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

	<u>EDY MANAGEMENT, L</u>	LC	
(Name of the Limited	d Liability Company as it now apper A Florida Limited Liability Company)	ars on our records.)	
(7	Triorida Elimica Elability Company)		0
The Articles of Organization for this Limited L	iability Company were filed on	January 4,2012	and assigned
Florida document number L1200000	1553		SE SE
			2
This amendment is submitted to amend the fol	lowing:		
This amendment is submitted to amend the for	iowing.		
A. If amending name, enter the new name of	of the limited liability company ho	<u>ere</u> :	S P
			· · · •
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Com	pany," the designation "l	LC" or the abbreviation
Enter new principal offices address, if appli-	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
the control of the second of t			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	(BOX)		
		. ···-	<u> </u>
B. If amending the registered agent and		our records, enter t	he name of the nev
registered agent and/or the new registered of	office address here:		
Name of New Registered Agent:	KWOK, HELEN EMILY		
New Registered Office Address:	4141 S FLORIDA AVE		
	E	inter Florida street ado	lress
	LAKELAND	, Florida	33813
	City	⁷	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>Name</u>	<u>Address</u>	Type of Action
KWOK, JOANNA	4141 S FLORIDA AVE LAKELAND, FL 3813	Add Remove
KWOK,HELEN EMILY	4141 S FLORIDA AVE LAKELAND, FL 33813	✓ Add ☐ Remove
		Add Remove
		Add Remove
		Add Remove
		Add Remove
nding any other information, ent	er change(s) here: (Attach additional sheets, if necessa	ry.)
September 12	,	
Signature of	amember of authorized representative of a member	
	KWOK, HELEN EMILY Typed or printed name of signee	
	KWOK, JOANNA KWOK, HELEN EMILY ding any other information, ent	KWOK, JOANNA 4141 S FLORIDA AVE LAKELAND, FL 3813 KWOK, HELEN EMILY 4141 S FLORIDA AVE LAKELAND, FL 33813 ding any other information, enter change(s) here: (Attach additional sheets. if necessary) September 12 2012 Signature of authorized representative of a member

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Filing Fee: \$25.00