## 2000023344

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J. BRYAN

FEB 27 2012

EXAMINER

## **COVER LETTER**

TO:	Registration S Division of Co			
SUBJI	ECT:	BALAN	CED RIG LLC	
			ted Liability Company	
		f Amendment and fee(s) are su	-	TALLAHASSEE, FLORIO
Plcase	return all corresp	ondence concerning this matte	to the following:	SEE O
т			HOMAS W MAYERS Name of Person	FLORIGE
		·		<b>7</b>
			Firm/Company	
7200			00 Gulf of Mexico Drive	
			Address	
		lone	City/State and Zip Code	
			Sendmarina@mac.com o be used for future annual report notification	)
For fur	ther information of	concerning this matter, please of	all;	
	Joa	an Bergstrom	at ( 941 ) 383	1301
	Name o	of Person	Area Code & Daytime Tele	phone Number
	•	he following amount:		
<b>₹</b> 25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Solution Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	Registi Divisio P.O. B	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAI	ANCED RIG LLC		ALC:	
( <u>Name of the Limited Liabl</u> (A Florid	lity Company as it now appear la Limited Liability Company)	s on our records.	FEB 24	
The Articles of Organization for this Limited Liability	y Company were filed on	2/16/2012	and assigned	
Florida document numberL12000023344	·		EL ON F	
This amendment is submitted to amend the following	:		Dr.	
A. If amending name, enter the new name of the li	imited liability company her	<u>e</u> :		
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Compa	ny," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD	DRESS)			
			<del></del>	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac	istered office address on o ddress here:	ur records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:			<del></del>	
New Registered Office Address:				
	Enter Florida street address			
<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 = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Thomas William Mayers	7250 Land's End	Add Remove
<del></del>			Add Remove
		. 7 :	Add Remove
			Remove 2
		•	Add Remove
			Add Remove
			Add Remove
D. If amending	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)	Kemove
	•		-
	· · · · · · · · · · · · · · · · · · ·	·	-
<u></u>	1 21 7.		-
Dated	All Berns	12 Thoms	
	Joan M.	Berastvim  orinted name of signee	

Page 2 of 2

Filing Fee: \$25.00