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OCT - 4 2012

EXAMINER



900240174789

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12 OCT -1 PM 3: 55, SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT:			
-			
The enclosed Articles of Amendment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Jannie J. Scott Name of Person			
UNDERGROUND 365 LLC Firm/Company			
1007 Dishman Loop Address			
Oviedo, FL 32765 City/State and Zip Code			
Jawrites (9 gm w. Com E-mail address: (to be used for future armual report notification)			
For further information concerning this matter, please call:			
Jonathon A. Robinson at 407, 756-7547 Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 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

MADERIAND 365 110

(Name of the Limited Liability Co.) (A Florida Limited Liability Co.)	ompany as it now appears on our inited Liability Company)	records.)
The Articles of Organization for this Limited Liability Com	npany were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the d	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	**************************************	≯ ∴ •
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	568 7
	 	A T
Enter new mailing address, if applicable:		SET P
(Mailing address MAY BE A POST OFFICE BOX)		SI CO
		25 55
B. If amending the registered agent and/or registered agent and/or the new registered office address		ds, enter the name of the new
Name of New Registered Agent:		·
New Registered Office Address:	Enter Floric	da straat addross
•	Enter Florida street address	
-	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 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 Type of Action **Title Address** Name _] Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00