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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN

Account Number : I20070000020 Phone : (813)435-3176

Fax Number : (813)333-6358

Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LORD FLORIDA CONNECTIONS, LLC

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H120002348903

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LORD FLORIDA CO	NNECTIONS	S, LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appear ability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL12000047573			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company her	<u>e:</u>	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			7 <u>8</u> 20
			×
Enter new mailing address, if applicable:			25 25
(Mailing address MAY BE A POST OFFICE BOX)			OF A ITI
	- ,)R 0 2	7A 9 02
B. If amending the registered agent and/or registered office address here		-	* 🗸
Name of New Registered Agent:			
New Registered Office Address:	7 2	ter Florida street addi	
	En		· ess
	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

المنافق			
10/04/2030	01:07	FAX	8133336358

NICK SPRADLIN

№0003/0003

HIZOCO2348903
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

Title	<u>Name</u>	Address	Type of Action
MGRM	SARAH RAYNOLDS LORD	17445 US HIGHWAY 192 SUITE 15 SUMMER BAY P CLERMONT FL 34714 US	Add 7 Remove
MGRM_	SARAH REYNOLDS LORD	17445 US HIGHWAY 192 SUITE 15 SUMMER BAY P CLERMONT FL 34714 US	Add Remove
-			Add Remove
			Add Remove
	·····		Add Remove
			Add Remove
D. If amendi	ng any other information, enter ch	ange(s) here: (Attach additional sheets, if necessar	v.)
			FIL 2012 SEP 25 ALL KHARKE
			25 AH 9
Dated	09/25	2012 . OA	7.E
•	Signature of a mer	nber or authorized representative of a member	
	NICKOLAS J. SPRA	DLIN AUTHORIZED REPRESENTATIVE	
-		ned or printed name of signee	

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