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(Re	questor's Name)				
(Ad	dress)				
. (Ad	dress)				
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(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE

B. BOSTICK
AUG - 7 2012
EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	· ECT:	HeadRush LLC		
0000		Name of Limited Liability Company		
The en	closed Articles o	of Amendment and fee(s) are submitted for filing.		
Please	return all corres	pondence concerning this matter to the following:		
Lacretia Moritz Name of Person				
	HeadRush LLC		·	
	Firm/Company			
	13026 Palm Beach Blvd			
	Ft Myers FL 33905			
		City/State and Zip Code	ACL	
		lacretiavarble12@centurylink.net	>	
For fur	ther information	E-mail address: (to be used for future annual report notifing concerning this matter, please call:	SSE 6	
	L	acretia Moritz at (239)	225-3304	
		e of Person Area Code & Daytim	e Telephone Number	
Enclos	sed is a check for	r the following amount:		
\$25.00 Filing Fee		✓\$30.00 Filing Fee & ☐\$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regi Divis P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 ahassee, FL 32314 STREET/COURI Registration Section Division of Corporations Clifton Building. 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	HeadRus	h LLC y as it now appears of ability Company)	our records.)			
The Articles of Organization for this Limited I Florida document number L12 0000	iability Company v		_	and assigned		
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	f the limited liabil	ity company here:				
The new name must be distinguishable and end w "L.L.C."	th the words "Limite	ed Liability Company,"	the designation "Ll	LC" or the abbreviation		
Enter new principal offices address, if appli	cable:					
(Principal office address MUST BE A STREE	ET ADDRESS)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>		LEAHAS SEE, FLE	TAUG - 5 PH		
B. If amending the registered agent and registered agent and/or the new registered of			हा records, <u>ente</u> ा	ျှင		
Name of New Registered Agent:	Lacretia Mori	tz				
New Registered Office Address:	13026 Palm Beach Blvd					
	Enter Florida street address					
	F	t Myers City	, Florida	33905		
New Registered Agent's Signature, if changing	Registered Agent:	Cuy		ыр Соае		
I hereby accept the appointment as register	ed agent and agree	e to act in this capac	city. I further agre	ee 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

being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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 Lacretia Moritz Owner 13026 Palm Beach Blvd ✓ Add Et Myers EL, 33905 Remove Chris Varble Owner 516 Holly Ave ☐ Add Labelle FL 33935 √ Remove Add 🔲 Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 23rd Dated _ a member or authorized representative of a member Lacretia Mortiz

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00