

# L12000054896

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
JUN 14 2012  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Name of Limited Liability Company

TIMBRTREND PRESERVATION LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRENDA G. BURNS

Name of Person

TIMBRTREND PRESERVATION LLC

Firm/Company

369 EAGLE DRIVE

Address

PANAMA CITY BEACH, FL 32407

City/State and Zip Code

brendapcb@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRENDA G. BURNS

Name of Person

at (850) 819-9089

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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  
TIMBRTREND PRESERVATION LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on APRIL 24, 2012 and assigned  
Florida document number L12000054896

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

BRIAN R. SULLIVAN  
329 FAIRWAY BLVD.

New Registered Office Address:

*Enter Florida street address*

PANAMA CITY BEACH, Florida  
City Zip Code  
32407

**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

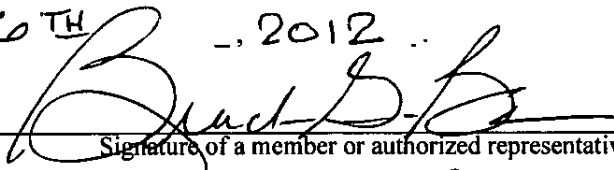
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

| <u>Title</u> | <u>Name</u>     | <u>Address</u>                                    | <u>Type of Action</u>  |
|--------------|-----------------|---|--|
| MGRM         | JONATHAN K DUKE | 5707 SIOUX DRIVE<br>TALLAHASSEE, FL.<br>32317     | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGRM         | BRENDA G. BURNS | 369 EAGLE DRIVE<br>PANAMA CITY BEACH, FL<br>32407 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                 |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                 |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                 |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JUNE 6TH, 2012



Signature of a member or authorized representative of a member

BRENDA G. BURNS

Typed or printed name of signee

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