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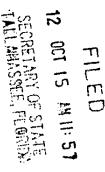
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475 Montgomery Place Altamonte Springs, FL 32714-3100 407.869.8900 407.869.7254 fax www.cohenflorida.com

October 10, 2012

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Please find attached the following information for filing with the State of Florida:

- 1. Resignation of MGRM, John B. Clayton from On Target Sales, LLC
- 2. A check in the amount of \$25.00 for filing of resignation form
- 3. Articles of Amendment for:
 - a. Name change of LLC to On Target Supply, LLC
 - b. New MGR Bradford D. Clayton
- 4. A check in the amount of \$25.00 for filing of Articles of Amendment

If any additional information is needed, please contact me at the address shown above. Thank you for your assistance in this matter.

Sincerely,

Cohen Florida, an affiliate of Cohen & Company

Joy La Monda

Administrative Assistant

enclosures

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ON TARGET	
(Name of Lim	ited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted fo
Please return all correspondence concerning	this matter to:
JOY LAMONDA	
(Contact Person)	
COHEN FLORIDA	
(Firm/Company)	
475 MONTGOMERY PLACE	<u> </u>
(Address)	
ALTAMONTE SPRINGS, FL 327	' 14
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
JOY LAMONDA	at (407) 937-2317
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t \$25 Filing Fee	to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)



FILED 12 OCT 15 AN II: 57 SECRETARY OF STATE TAELAMASSEE, PRORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the lim of State is:	onited liability company as it a		of the Florida Department
2. This limited liability	y company was organized und	der the laws of: 	
3. The Florida docume L120000598	ent/registration number of thi 90	s limited liability con 	npany is:
•	e of Person Resigning) ty company and affirm the lin	_, hereby resign as a	(Print Title)
Signature of Resign	B Clayton ing Member, Managing Mem	/0/10/12 ber or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (5/06)