





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2012

BARRIOS-BALBIN P.A.  
ATTN: LOUIS M. BARRIOS BALBIN  
201 ALHAMBRA CIRCLE SUITE 500  
CORAL GABLES, FL 33134

SUBJECT: TIPSYPARPON OF ESTERO, LLC  
Ref. Number: L12000064873

We have received your document for TIPSYPARPON OF ESTERO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 512A00019873



**Barrios-Balbin P.A.**

**Louis M. Barrios-Balbin**  
Attorney at Law

201 Alhambra Circle  
Suite 500  
Coral Gables, FL 33134

Phone: 305.443.1923  
Fax: 305.443.1925  
barriosbalbinpa@att.net

July 23, 2012

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

Re: Topsy Tarpon of Estero, LLC  
Document No. L12000064873

Dear Madame or Sir:

Enclosed, please find a copy of the Articles of Amendment to Articles of Organization for the above-referenced limited liability company. Also enclosed is a check, numbered 864, made payable to Division of Corporations, in the amount of \$25.00, which represents the filing fee for the same.

Sincerely,

Louis M. Barrios-Balbin

LMBB/mo  
enclosures

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Tipsy Tarpon of Estero, LLC

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

FILED

12 AUG 10 AM 11:09

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on May 14, 2012 and assigned  
Florida document number L12000064873

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)

**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:

New Registered Office Address:

*Enter Florida street address*

Florida

City

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

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

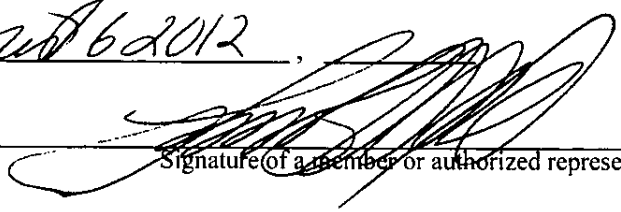
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Mark McKvigan	9812 Mar Lago Circle Ft. Myers, Florida 33919	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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\_\_\_\_\_

FILED  
 12 AUG 10 AM 11:09  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Dated August 6 2012



Signature of a member or authorized representative of a member

\_\_\_\_\_  
Typed or printed name of signee