L12000006747

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J. BRYAN

JUN 12 2012

EXAMINER

COVER LETTER

TO:

TO:	Registration S Division of Co			
SUBJE				
SOBJE		Name of Lim	ited Liability Company	
The end	closed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
			Tristan OConnell	
			Name of Person	
			Firm/Company	TALL HASSEE, FL
	4250 Park Blvd			SSER P III
			Address	PR 3:31
		P	inellas Park, FL 33781	REFERENCE OF THE PARTY OF THE P
		tris	City/State and Zip Code tan.oconnell@mac.com	
			to be used for future annual report notification)
For fur	ther information	concerning this matter, please	call:	
	Tris	stan OConnell	at (410) 346	.5357
	Name	of Person	Area Code & Daytime Tele	phone Number
Enclose	ed is a check for t	the following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisi P.O. E	ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stuff at	nd Putt of Arcadia		
(Name of the Limited Liability (A Florida	Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability C Florida document numberL12000066747	Company were filed on	5/17/12	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company her	·e:	TILL THE TENERS OF THE TENERS
The new name must be distinguishable and end with the world.L.C."	rds "Limited Liability Compa	any," the designation ⁵	Lee or the abbleviati
Enter new principal offices address, if applicable:			25.
(Principal office address MUST BE A STREET ADDI	RESS)		200
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-		
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter</u>	the name of the no
Name of New Registered Agent:			
New Registered Office Address:		771 11	
	En	ter Florida street add	dress
	City	, Florida	Zip Code
	cuy		zip Coae

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Tristan OConnell	4250 Park Blvd	Add
		Pinellas Park, FL 33781	Remove
			Add Remove
		→. ,	
			Add
			a Tarkemove
			SE PO
			TA A A A
			Remove
			Add
			Remove
			
			_
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary	·)
271 11 (411)		change (b) here. (2 maon adamonal sheets, 1) necessary	•/
•			
- 11			
Dated	June 1	2012	
	Signature of a i	member or authorized representative of a member	
	C	Tristan OConnell	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00