L12000075482

| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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J. SAULSBERRY EXAMINER JAN 10 2013



January 3, 2013

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

Dear Sir or Madam:

Enclosed please find the Articles of Amendment for PIER-LE INVESTMENTS, LLC., together with a check in the amount of \$25.00 (Twenty Five Dollars and 00/100 Dollars), for the filing fee.

If you have any questions regarding this matter, then please contact me at (904) 810-2410.

Sincerely,

MULLIGAN & KAUTTU, P.L.

By: Jane West, Legal Assistant

For the Firm

Enclosures

Ron Pierle cc:

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

PIER-LE INVESTMENTS, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Melissa S. Kauttu, Esq.

Name of Person

Mulligan & Kauttu, P.L.

Firm/Company

1510 N. Ponce de Leon Blvd., Ste. B

Address

St. Augustine, FL 32084

City/State and Zip Code

service@staugustinelegal.com

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

For further information concerning this matter, please call:

Melissa S. Kauttu

_{...}904、810-2410

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for 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)

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

| PIER-LE INVESTMENTS, | | | |
|--|---|--|------------|
| (<u>Name of the Limited</u> (A | Liability Company as it now app Florida Limited Liability Compan | ears on our records.) | |
| The Articles of Organization for this Limited Life Florida document number <u>L12000075482</u> | | | ned |
| This amendment is submitted to amend the follo | owing: | | |
| A. If amending name, enter the new name of | f the limited liability company | <u>here</u> : | |
| The new name must be distinguishable and end wit "L.L.C." | th the words "Limited Liability Con | npany," the designation "LLC" or the abb | oreviation |
| Enter new principal offices address, if applic | able: | 7013 | |
| (Principal office address MUST BE A STREET ADDRESS) | | JAN JAN | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | <u>BOX)</u> | ARY/OF STATE | |
| B. If amending the registered agent and/ registered agent and/or the new registered of | • | n our records, enter the name of | the new |
| Name of New Registered Agent: | Melissa S. Kauttu, Esq. | | |
| New Registered Office Address: | 1510 N. Ponce de Leor | Blvd., Ste. B | |
| | | Enter Florida street address | |
| | St. Augustine | , Florida 32084 | |
| | 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, <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> | Name | Address | Type of Action |
|--------------|-------------|-------------------------|----------------|
| MGRM | R.J. Pierle | 301 Fifth Street | Add |
| | | St. Augustine, FL 32084 | Remove |
| | | | Add |
| | | | Remove |
| | | | Add |
| | | AFLAHA | Remove |
| | | SEE FLORIDA | Add Remove |
| | | | |
| | | | Add |
| | | | |
| | | | Remove |
| | | | |

| If am | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|-------|---|
| | |
| | |
| | |
| | |
| | |
| ed | January 3 , 2013 . |
| | Maratta |
| | Signature of a member or authorized representative of a member |
| | Melissa S. Kanthy attorney for LC |
| | Typed or printed name of signee |
| | Page 3 of 3 |

Filing Fee: \$25.00