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## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJI	rc⊤•	3117 S	WANN, LLC	
3000			ed Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
Wilson D. Ayala, III				
Name of Person				
The Ayala Law Firm, PLLC				
Firm/Company				
			P.O. Box 320926	
			Address	
		Ta	mpa, FL 33679-2926	<u>.                                    </u>
			City/State and Zip Code	
wayala@ayalalawfirm.com  E-mail address: (to be used for future annual report notification)				ation)
For fu	rther information co	oncerning this matter, please ca		···,
	Wilso	n D. Ayala, III	at ()	16-6060
	Name of	Person	Area Code & Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
<b>₹</b> \$2:	5.00 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

3117 SWA	ANN, LLC	_			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.  Liability Company)				
·					
The Articles of Organization for this Limited Liability Company	were filed on 06/15/2012 and	assigned			
Florida document number L12000079737					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	pility company here:				
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the	ne abbreviation			
Enter new principal offices address, if applicable:	4601 Central Avenue				
(Principal office address MUST BE A STREET ADDRESS)	St. Petersburg, FL 33713				
	$Z_{\mathcal{G}}$				
Enter new mailing address, if applicable:	4601 Central Avenue				
(Mailing address MAY BE A POST OFFICE BOX)	St. Petersburg, FL 33713	Til True			
	SSE 28	San Sant			
	L. L	in .			
B. If amending the registered agent and/or registered of	ffice address on our records, <u>enter the nam</u>	e of the nev			
registered agent and/or the new registered office address her	22 No. 1	The separate			
Name of New Registered Agent:					
New Registered Office Address:					
Enter Florida street address					
	, Florida				
	City Zip C	ode			

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 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 Title <u>Name</u> **Address** Type of Action MGR Ben Gelston 701 Mirror Lake Dr. North. ☐ Add Suite 403\_ ✓ Remove St. Petersburg, FL 33701 MGR N. Ann Goldapp 4601 Central Avenue **✓** Add Remove St. Petersburg, FL 33713 ☐ Add ☐ Remove □Add Remove  $\square$ Add Remove  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 24 2012 Dated \_ Signature of a member of authorized representative of a member Wilson D. Ayala, III Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00