

10/24/2030 01:07 FAX 813 333

NICK SPRADLIN

20001/0003

Division of Corporations

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L120000080310

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : 120070000020
Phone : (813) 435-3176
Fax Number : (813) 333-6358

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CYRUS TRAILS, LLC

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OCT 16 2012

H120002496393

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CYRUS TRAILS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 06/18/2012 and assigned
Florida document number L12000080310

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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SHOWTIME CONSTRUCTION, LLC

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:

5710 SE 169TH AVE.

(Principal office address MUST BE A STREET ADDRESS)

MICANOPY, FLORIDA 32667

Enter new mailing address, if applicable:

5710 SE 169TH AVE.

(Mailing address MAY BE A POST OFFICE BOX)

MICANOPY, FLORIDA 32667

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:

TERRANCE PATTERSON

New Registered Office Address:

5710 SE 169TH AVE.

Enter Florida street address

MICANOPY

Florida

32667

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.

(Signature)
If Changing Registered Agent, Signature of New Registered Agent

H120002496393

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:

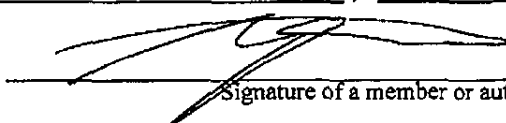
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	TERRANCE PATTERSON	5710 SE 169TH AVE.	<input checked="" type="checkbox"/> Add
		MICANOPY, FLORIDA 32667	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated 10/15, 2012



Signature of a member or authorized representative of a member

TERRANCE PATTERSON

Typed or printed name of signee

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