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SECRETARY OF STATE

2013 DEC 20 PM 1: 5

DEC 2 7 2013 T. **HAMPTON**

COVER LETTER

TO: Registration Section Division of Corpora		٠ .	•
SUBJECT: Florida	Moble Home Name of Limited L	Sales LLC iability Company	
The enclosed Articles of Ame	ndment and fee(s) are submitte	d for filing.	
Please return all corresponden	ce concerning this matter to the	e following:	
	Eileen Br	ennan Name of Person	
_	Florida Mobile	Name of Person Salej Firm/Company	LLC
<u>u</u>	7 Colony Dr	N Ellenton	21 34222
_		y/State and Zip Code Alog . Com Jed for future annual report notification	n)
For further information conce	rning this matter, please call:		
Norman Bannis Name of Pers	on	at (<u>813) </u>	Phone Number
Enclosed is a check for the fol	llowing amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	1\$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

Aorida Moble	Home Sales UC	
(Name of the Limited Li (A Fl	ability Company as it now appears on our re orida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabs	1 1	and assigned .
This amendment is submitted to amend the follows		FILS 3DEC 20 ECATIONS
A. If amending name, enter the new name of th	e numeu naonny company nere:	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company," the de	signation "LEC" or the abbreviation
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	- AFRICA
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	a 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 Type of Action Address <u>Name</u> **Title** Bannister, Norman A Jr. Add Remove Add Remove Add Remove Add Remove Add

Remove

anding any	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
Dec	19 , 2013 .
	Erlen Do
	Signature of a member or authorized representative of a member
	7
	Eileen Brennan
	Dec

Page 3 of 3

Filing Fee: \$25.00

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