## L12000125587

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
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(Do	ocument Number)	
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		·

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**EXAMINER** 



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SECRUBATY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO:	Registration Se Division of Cor				
SUBJE	2 <b>0</b> Te	Brant Roo	ck Partners, LLC		
SUBJI		Name of Limi	ted Liability Company		-
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		72 P
			Joseph T. Angley		The state of the s
			Name of Person		- 155
		Bra	ant Rock Partners, LLC		MHO. 22
			Firm/Company	- <u>-</u>	9E 22
			2001 Jewell Avenue		7
			Address		<b></b>
		V	Vinter Park, FL 32789		
			City/State and Zip Code		<del>_</del>
			drangley@me.com to be used for future annual report not	ification)	_
For fur	ther information o	concerning this matter, please of		incation)	
	Jos	eph T. Angley	at ( 407 )	949-2431	
	Name o	of Person		me Telephone Num	ber
Enclos	sed is a check for t	he following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certifi ed) Certifi	Filing Fee, cate of Status & ied Copy ional 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

## Brant Rock Partners, LLC

( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appe Limited Liability Company	ars on our records.)	- Constitution of the second
The Articles of Organization for this Limited Liability Florida document number		October 2, 2012	and assigned
This amendment is submitted to amend the following:		`•	
A. If amending name, enter the new name of the lin	nited liability company h	ere:	OF.
Jose	ph T. Angley, LLC		
The new name must be distinguishable and end with the we"L.L.C."	ords "Limited Liability Com	pany," the designation "LLC	or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
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 ad		our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	E	Enter Florida street address	8
		, Florida	
	City	2	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 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

	<u>Name</u>	Address	Type of Actio
			Add Remove
		<u> </u>	Add Remove
	<u>.</u>		T Damassa
<del></del>	***************************************		Domovo
			Add Remove
			□ D am avia
	ding any other information	enter change(s) here: (Attach additional shee	ets, if necessary.)
. If amen	uing any other information,		
. If amen — —	ung any other information,		
. If amen	using any other information,		
. If amen	October 5		
- - -	October 5	2012  e of a member or authorized representative of a me	

Page 2 of 2

Filing Fee: \$25.00