

L/2000/26/59

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

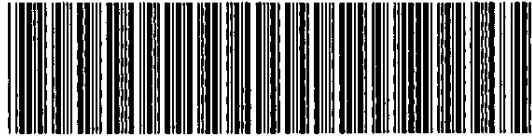
Special Instructions to Filing Officer:

A. LUNT

DEC - 3 2012

EXAMINER

Office Use Only



800242165508

11/29/12--01004--022 **25.00

FILED
2012 NOV 29 PM 3 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IRON CROSS 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:

PATRICK MURPHY

Name of Person

IRON CROSS LLC

Firm/Company

2348 N. MILITARY TRAIL

Address

WEST PALM BEACH, FL. 33409

City/State and Zip Code

IRONCROSSCYCLESFB@GMAIL.COM

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

For further information concerning this matter, please call:

PATRICK MURPHY

Name of Person

at 704 237.2343

Area Code & Daytime Telephone Number

RECEIVED
TALLAHASSEE, FLORIDA
NOV 29 PM 3:30

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

IRON CROSS 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 _____ and assigned
Florida document number L12000126159

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

New Registered Office Address: _____

Enter Florida 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

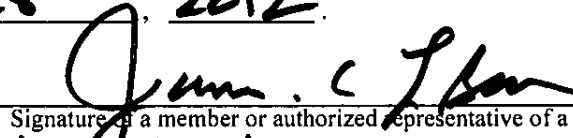
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JAMES LABAR	2348 N. MILITARY TRAIL WEST PALM BEACH, FL 33409	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	DAVE CHIDESTER	DAVE CHIDESTER 2348 N. MILITARY TRAIL WEST PALM BEACH, FL 33409	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	PATRICK MURPHY	2348 N. MILITARY TRAIL WEST PALM BEACH, FL 33409	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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2012 NOV 29 PM 3:30
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

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

Dated 11.28 2012


Signature of a member or authorized representative of a member
JAMES LABAR
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2012 MAY 29 PM 3:30
CLERK OF STATE
TALLAHASSEE, FLORIDA