112000148190

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SEP 11 2013 D. EPUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 510 3rd Street, 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:

	Name of Person
	Firm/Company
1	015 Atlantic Blvd, Unit 422
_	Address
F	Atlantic Beach, FI 32233
	City/State and Zip Code
S	anderson1980@gmail.com
_	E-mail address: (to be used for future annual report notification

Joseph Sanderson

_., 904、316-7667

Name of Person

Area Code & Daytime Telephone Number

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

510 3rd Street, LLC					
(Name of the Limited (A	Liability Compar Florida Limited L	ny as it now appears on our r iability Company)	ecords.)		
The Articles of Organization for this Limited Lia Florida document number L12000148190	ibility Company	were filed on		and ass	igned
This amendment is submitted to amend the follow	wing;		the designation "LLC" or the abbreviation A second		
A. If amending name, enter the new name of	the following: name of the limited liability company here: d end with the words "Limited Liability Company," the designation "LLC" or the abbreviation of applicable: STREET ADDRESS) able: 1015 Atlantic Blvd, # 422 FFICE BOX) Atlantic Beach, FL 32233 Atlantic Beach, FL 32233 Atlantic Blvd, Unit 422 Enter Florida street address Atlantic Beach Florida 32233				
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the do	signation "LI	C" or the	abbreviatio
Enter new principal offices address, if applica	ble:		<u>.</u> .	ETT F	9
(Principal office address MUST BE A STREET	(ADDRESS)			٠٠ حب	-
Enter new mailing address, if applicable:		1015 Atlantic Blvd, #	422	ARY I	0
(Mailing address MAY BE A POST OFFICE E	<u>30X)</u>	Atlantic Beach, FL 3	2233	28 C	Ö L
B. If amending the registered agent and/o registered agent and/or the new registered off			ds, <u>enter th</u>	B FTT	\$
Name of New Registered Agent:					
New Registered Office Address:	1015 Atlant				
	Atlantia D-				
	Atlantic Be	City,	Florida 324	Zip Cod	e
		= · · •			

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 = Man MGRM = M	ager anaging Member		
<u>Title</u>	<u>Name</u>	<u>Address</u> <u>T</u>	ype of Action
			Add
			Remove
			Add
			Remove
			Add
		·	Remove
		And the second s	2013 SEI
		SET.	Address .
		SEE FLORIDA	Remove 9: 36
			G G
			Add
			Remove
			Add
			Remove

Change Address of MGR Joseph Sandersor	•
1015 Atlantic Blvd, Unit 422, Atlantic Beach	, FL 32233
9/6/2013	
Mal	
Signature of a member or authorized representative of Joseph Sanderson	a member
Typed or printed name of signee	

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Filing Fee: \$25.00

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