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FEB 1 4 2013 J. BRYAN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G&Z MOLLUSKS, 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:

LEONARD H. BAIRD, JR.

Name of Person

ATTORNEY AT LAW

Firm/Company

P. O. DRAWER 121066

Address

CLERMONT, FL 34712-1066

City/State and Zip Code

LEONARDHBAIRDJR@AOL.COM

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

For further information concerning this matter, please call:

Leonard H. Baird, Jr.

ູ 352 394-2114

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

G&Z MOLLUSKS, 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 Li	iability Company	were filed on February 8,	, 2013 and assigned
Florida document number L13000020333	 ·		and assigned and assigned signation "LLC" or the abbreviation
This amendment is submitted to amend the follow	owing:		13 17
A. If amending name, enter the new name of	f the limited liabi	lity company here:	P. C
			ن
The new name must be distinguishable and end wit "L.L.C."	h the words "Limite	ed Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applications	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>		· · · · · · · · · · · · · · · · · · ·
			<u>. </u>
B. If amending the registered agent and/or registered agent and/or the new registered of	or registered offi fice address here	ice address on our record :	ls, <u>enter the name of the new</u>
Name of New Registered Agent:	-		
New Registered Office Address:	635 West Highway 50, Suite A		
			street address
	Clermont	, F	Florida 34711 Zip Code
		City	Zip Code
New Registered Agent's Signature, if changing R	legistered Agent:		
I hereby accept the appointment as registered the provisions of all statutes relative to the pracept the obligations of my position as regis being filed to merely reflect a change in the re company has been notified in writing of this of	roper and comple stered agent as pr registered office o	ete performance of my duti rovided for in Chapter 608	ies, and I am familiar with and B, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	LEONARD H. BAIRD, JR.	11518 South Indian River Drive	Add
		Sebastian, FL 32958	Remove
MGRM	LEONARD H. BAIRD, III	11518 South Indian Driver Drive	Add
		Sebastian, FL 32958	Remove
		SECRETURY OF LOR	Add Regnove
			Remove
			Add
			Remove
			Add
			Remove

. If amei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
ed	2/11/13
	Signature of a member or authorized representative of a member
	LEONARD H. BAIRD, JR.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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