1-13000025333

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COVER LETTER

	istration Sec ision of Corp			
SUBJECT:	<u> </u>	Name of Limit	PROPERTIES LL	<u>C</u>
The enclosed	Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please return	all correspor	dence concerning this matter t	to the following:	
		DERCA	Name of Person	
			Firm/Company	
		11985 /	Amenicus Lane	
		Foor Mue	n_s FL 33907 City/State and Zip Code	2013 MAR -7 SCHETARES
		Perfection E-mail address: (to	Des + 6 ao , Com The used for future annual report notification	HASSEE, FE
For further in	nformation co	ncerning this matter, please ca	all:	OF STAIL
<u>) 3 (</u>	Name of	Person	at (<u>239) 482-3</u> Area Code & Daytime Tel	723
Enclosed is a	a check for th	e following amount:		
∑ \$ 25.00 Fi	iling 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)
	Registra Division P.O. Bo	NG ADDRESS: ation Section to of Corporations to 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L	ability Compan	Y as it now appears on or lability Company)	ur records.)
The Articles of Organization for this Limited Liab		were filed on 21	and assigned
Tiorida document number	<u>رړو و.</u>		
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liabi	lity company here:	
REDNECK ASSETS	LLC		
The new name must be distinguishable and end with the "L.L.C."	he words "Limit	ed Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	le:	SAME	
(Principal office address MUST BE A STREET)	ADDRESS)		2013
Enter new mailing address, if applicable:		SAME	mo mo
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>		
B. If amending the registered agent and/or registered agent and/or the new registered offic			cords, enter the name of the new
registered agent and/or the new registered offic	e addites here	i•	
Name of New Registered Agent:	Same		
New Registered Office Address:	<u></u>		
		Enter Flo	rida 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 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 <u>Title</u> <u>Name</u> <u>Address</u> SAME Remove Remove HASSEE FLORIDA #. ⊕. Remove Remove Remove

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if nec	essary.)	
	NAME CHANGE ONLY	 	
			
Dated	FEBRUARY 28 , 2013.		
	John Hrickland		
	Signature of a member or authorized representative of a member		
	Typed or printed name of signee		
	Page 3 of 3		
	Filing Fee: \$25.00	2013 HAR SECRETA	
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Electronic Articles of Organization For Florida Limited Liability Company

L13000025333 FILED 8:00 AM February 18, 2013 Sec. Of State ncausseaux

Article I

The name of the Limited Liability Company is: PISTOL PETES PROPERTIES LLC

Article II

The street address of the principal office of the Limited Liability Company is:

11985 AMEDICUS LANE FORT MYERS, FL. US 33907

The mailing address of the Limited Liability Company is:

P O BOX 61413 FORT MYERS, FL. US 33906

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

DEBRA L STRICKLAND 11985 AMEDICUS LANE FORT MYERS, FL. 33907

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DEBRA L. STRICKLAND

Article V

The name and address of managing members/managers are:

Title: MGR DEBRA L STRICKLAND 11985 AMEDICUS LANE FORT MYERS, FL. 33907 US L13000025333 FILED 8:00 AM February 18, 2013 Sec. Of State ncausseaux

Article VI

The effective date for this Limited Liability Company shall be: 02/18/2013

Signature of member or an authorized representative of a member

Electronic Signature: DEBRA L. STRICKLAND

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.