Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

From:

Account Name : LEGALZOOM.COM INC.

Account Number: I20010000062 (323) 962-8600 Phone Fax Number : (323) 962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRAIRIE LAKE MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	1
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03/13/2013 18:46 FAX

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## **COVER LETTER**

TO: Registration Section Division of Corporations		e .
SUBJECT: PRAIRIE LAKE MANAGEMENT	r, llc	
	ited Liability Company)	
The enclosed Articles of Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Imelda Vasquez		
	(Name of Person)	
Legalzoom.com, Inc.	(Firm/Company)	
100 W. Broadway St	lite 100 (Address)	····
Glendale, CA 91210	, ,	
	(City/State and Zip Code)	
For further information concerning this matter, please c	alt:	
Imelda Vasquez (Name of Person)	at ( <u>323</u> ) <u>962-8600 ex</u> i (Area Code & Daytime 1	
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)	Sol.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, PL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

03/13/2013 18:45 FAX

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## **COVER LETTER**

TO: Registration Se Division of Co	
SUBJECT: PRAIRIE	E LAKÉ MANAGEMENT, LLC
	(Name of Limited Liability Company)
	Amendment and fee(s) are submitted for filing.  Condence concerning this matter to the following:
	Imelda Vasquez
	(Name of Person)
	Legalzoom.com, Inc.
	(Firm/Company)
	100 W. Broadway Suite 100
	(Address)
	Glendale, CA 91210
	(City/State and Zip Code)
For further information of	concerning this matter, please call:
Imelda Vasquez	at (323 ) 962-8600 ext 7950
(Name	of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the	he following amount:
\$25.00 Filling Fee	S30.00 Filing Fee & ✓ S55.00 Filing Fee & Certificate of Status  Certified Copy (additional copy is enclosed)  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 03/13/2013 18:45 FAX

FILED 4923 SECRETARY OF 4923 DIVISION OF COREGRATERY

2113 MAR 15 AM 8: 56

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRAIRIE LAKE MANAGEM (Name of the Limited)	ENT, LLC Liability Company as it now Florida Limited Liability Con	annears on our records.)	
The Articles of Organization for this Limited Lie	ability Company were filed	on 02/20/2013 and assigned	
Florida document number <u>L13000026449</u>	<del>,,</del> .		
This amondment is submitted to amond the follo	owing;		
A. If amending name, enter the new name of	the ilmited liability compa	any here:	
"L.L.C."	or registered office addre	Company," the designation "LLC" or the abbreviation to the abbreviation as on our records, enter the name of the new	
Name of New Registered Agent:	Derrick McCulley		
New Registered Office Address:	9707 Provencal Ave		
	(Enter Florida street address)		
	Seffner	, Florida <u>33584</u>	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing F	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

**Derrick McCulley** 

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:

	Manager = Managing Member		
<u> Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
	, <u></u>		Add Remove
			Add Remove
			Add Remove
D. Ifan		re(s) here: (Attach additional sheets, if necessaries of the limited liability company sh	
	9707 Provencel Ave Seffner, FL 335		<u> </u>
	Article V. The address of the following Gregory McCulley, 9707 Provence		SECRETAL SEC
Dated _	03/13/2013, Signature of a morbide	M = COLY of authorized representative of a member	ARY OF STA
		Gregory McCulley Tor printed name of signee	55 56

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Filing Fee: \$25.00