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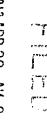
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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J. SAULSBERRY EXAMINER

MAY 2 2013

COVER LETTER

TO: Registration Secti Division of Corpo					
SUBJECT: PAR	POT BAY Name of Limite	ed Liability Company			
The enclosed Articles of Art	nendment and fee(s) are subr	mitted for filing.			
Please return all correspond	ence concerning this matter (to the following:			
	Charles Chucik	Name of Person			
		Firm/Company			
	23425	RINGEGOOD Address			
	SOUTH P CPOWGIAS S E-mail address: (to	City/State and Zip Code CULDANCE O YAIL of the be used for future annual report notification	119 0, con	2013 APR 29	**************************************
For further information con	cerning this matter, please ca	all:		3	٦٦
Charles Name of P	PowERS erson	at (286, 853-76 Area Code & Daytime Tele	6.5 phone Number	8 8 12	*
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 Certificate of Certified C (additional	of Status &	ed)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Business Court Section 1 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Lability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number 130-037416	1 1
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limite"L.L.C." Enter new principal offices address, if applicable:	ed Liability Company," the designation "LLC" or the abbreviation
(Principal office address MUST BE A STREET ADDRESS)	72
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2012 S. RINGE COOR SOUTH DAYTONA FC 32/19
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
	RLES POWERS
New Registered Office Address: 234	2 5. RIDGELSOD Enter Florida street address
South A	Off TONA, Florida 52/9 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

Page 1 of 3

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>Name</u> **Address Type of Action Title** RUZHOI SELMAU 1975 7TH AUR Dic/AND FL 32724 X Remove MGR CHARIES POWER 2502 TRIBBLE PR X Add PORT ORANGE FL 32/28 Remove MGR CHAD LORD 48541 SCR 203 Add WCDWALD, OK 7386/ Remove SWI ATLOWSKI PORT NEANGE FL 32125 Rem PORT ORANGE FL 32103 Remove MGR POUND L. REYMOND DELTONA PC 37738

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
•				
-				
_				
_				
_				
ed				
	*			
	signature of a member or authorized representative of a member			
	EHARLES POWERS			
	Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00

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