

#L 13000048041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

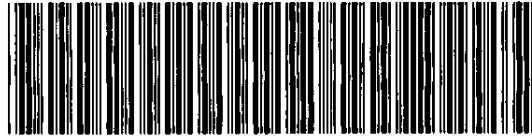
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
13 JUN 26 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
JUN 27 2013

June 25, 2013

VIA OVERNIGHT MAIL

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: **ARTICLES OF AMENDMENT**
NORFOLK, LLC

Dear Sir/Madam:

Enclosed please find the original and one copy of the Articles of Amendment for Norfolk, LLC, together with a check in the amount of \$60.00, representing payment for the following expenses:

Filing Fee	\$ 25.00
Certified Copy	\$ 30.00
Certificate of Status	\$ 5.00
	\$ 60.00

Please return the certified copy to this office at your earliest convenience.

If you should have any questions or require additional information, please do not hesitate to contact the undersigned.

Sincerely,


KEITH A. JAMES

KAJ/

cc: Stephen Schneider



**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
13 JUN 26 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Norfolk, 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 Liability Company were filed on April 1, 2013 and assigned
Florida document number L13000048041.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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 Changing Registered Agent, Signature of New Registered Agent

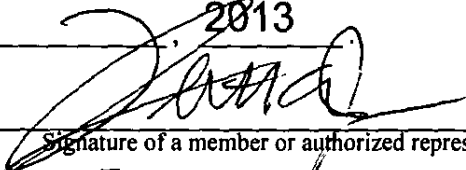
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Alicia Faith King	601 North Ocean Street, Jacksonville, Florida 32202	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated June 25, 2013


Signature of a member or authorized representative of a member

Keith A. James, Esq.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00