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COVER LETTER

10:	Registration Section Division of Corporations	
	March	Headson

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	LeBran	Tallent TR Name of Person	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	2000 N	Meridian Rd Address	apt-249
	Tallahassee	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	E-mail address: (to	be used for future annual report notificati	on)
For further information of	concerning this matter, please ca	ıll:	•
Maff	Vaunhland	at (SO) 345 - Old Area Code & Daytime Te	656 lephone Number
Enclosed is a check for t	he 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 State Certified Copy

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Handy mea	Section 6				
(Name of the Limited/Liability Com	pany as it now appears on d Liability Company)	our records.)			
		20.12			
The Articles of Organization for this Limited Liability Compa	any were filed on 95	0-12	and assi	gned	
Florida document number <u>L13008678319</u> .				•	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited li	iability company here:				
Men of all trades 1	14C		· · · · · · · · · · · · · · · · · · ·		
The new name must be distinguishable and end with the words "Li"L.L.C."	imited Liability Company,"	the designation "LLC	" or the at	obreviat	tion
Enter new principal offices address, if applicable:			E 83	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)	<u></u>		FU	SEP.	·
			_	_ _	
•			HO		HO
Enter new mailing address, if applicable:			2000 C		{
(Muiling address MAY BE A POST OFFICE BOX)			高	- ::	_
				-6• -	_
B. If amending the registered agent and/or registered	office address on our	records, enter the	name of	f the r	1ew
registered agent and/or the new registered office address h					<u></u>
Name of New Registered Agent:		·			_
New Registered Office Address:					
	Enter I	Florida street addres	S		
		, 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 = Ma $MGRM = N$	nager ⁄Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
		 	TALLAHASSE
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			Remove
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). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
	•
ated	9/13/13
	Alsa Tolland
	Signature of a member or authorized representative of a member Le Bren Tallant TR
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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