

L13000084346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

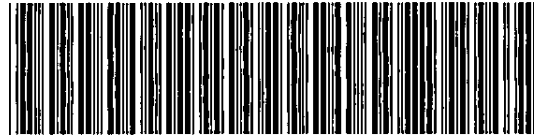
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400248518064

RECEIVED
DEPARTMENT OF STATE
13 JUN 24 PM 4:17

FILED
13 JUN 24 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

JUN 25 2013

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 687181 7943262

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : June 13, 2013

ORDER TIME : 12:58 PM

ORDER NO. : 687181-010

CUSTOMER NO: 7943262

DOMESTIC AMENDMENT FILING

NAME: NOEL LANE, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS: _____

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NOEL LANE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
13 JUN 24 AM 4 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 06/11/2013 and assigned
Florida document number L13000084346.

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

14709 HOWARD ROAD

BRYCEVILLE, FL 32009

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

City Florida 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

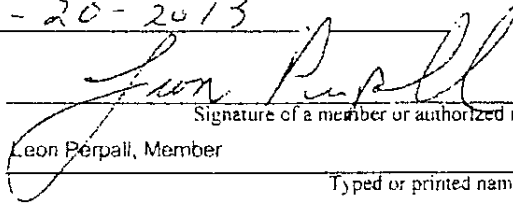
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED

13 JUN 24 AM 10: 24

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Dated 6-20-2013



Signature of a member or authorized representative of a member

Leon Perrell, Member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00