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SECRETARY OF STATE TALLAHASSEE FINANCE

OCT 3 1 2013

T. HAMPTON

## **COVER LETTER**

SUBJECT: City Mouse Country Mouse, LLC.  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Brittany Webb  Name of Person  Firm/Company  116 NW Main Street  Address  Williston, FL 32696  City/State and Zip Code  Drittlangel12@aol.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Brittany Webb  at (352 )558-4381  Area Code & Daytime Telephone Number  Enclosed is a check for the following amount:  Certificate of Status  Certificate of Status & Certified Copy (additional copy is enclosed)  (additional copy is enclosed)	TO: Registration S Division of Co			
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		□\$30.00 Filing Fee &	Certified Copy	Certificate of Status &

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

City Mouse Country Mouse, 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 06/17/13 and assigned Florida document number L13000087575 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 "L.L.C." 6051 NE SR 121 Enter new principal offices address, if applicable: Williston, FL (Principal office address MUST BE A STREET ADDRESS) 32696 116 NW Main St Enter new mailing address, if applicable: Williston, FL (Mailing address MAY BE A POST OFFICE BOX) 32696 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

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.

City

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

	<u>Name</u>	Address	Type of Acti
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		Williston, FL	Reme
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If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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.us	Signature of a member or authorized representative of a member
	Britany Webb Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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