Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000213235 3)))



H130002132353ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number: 075350000514

Phone

: (727)442-1200

Fax Number

: (727)443-5829

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	:	•			
				 	 	_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAW BUCK, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Lis	bility Company as it now appears on our records.)	
(A Fig	ibility Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability Plorida document number 113000134	lity Company were filed on	and assigned
This amendment is submitted to amend the following. A. If amending name, enter the new name of the	e limited Hability company here:	13 SEP 25 PH
The new name must be distinguishable and end with the "L.L.C." Enter new principal offices address, if applicable	ne words "Limited Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>.</u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	address
	. Florida	
•	City	Zip Code
Non-Basistand & sentia Clauseaum if showing Bas	intowed Aponto	

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 affice 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 Managor or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member				
<u>Title</u>	Name	<u>Address</u>	Type of Action	
MGR	PATRICIA JOHNSON	461 Waterford Circle East	Add	
		Tarpon Springs, Florida 34688	Remove	
MGR	JOHNNY JOHNSON, JR.	461 Waterford Circle East		
		Tarpon Springs, Florida 34688	_	
			Add Remove	
			ACCARETAR	
			PH 12: 23 Remove	
			Add	

D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
Dated Sept	tember 25, 2013
	al
~	Signature of a member or authorized representative of a member
•	ALAN S. GASSMAN, AUTHORIZED REPRESENTATIVE
_	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 SEP 25 PH 12: 27