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COVER LETTER

TO:

Registration Section
Division of Corporations

GAVARD INVESTMENT OF SARASOTA, LLC

SUBJECT:

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:

TROY H. MYERS, JR.

Name of Person

ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, PA.

Firm/Company

2033 MAIN ST STE 600

Address

SARASOTA, FL 34237

City/State and Zip Code

TMYERS@ICARDMERRILL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TROY H. MYERS, JR.

at (941) 953-8110

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fcc &
Certified Copy
(additional copy is enclosed)

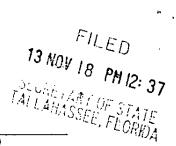
□\$69.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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



GAVARD INVESTMENT OF SARASOTA, 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 Liab Florida document number <u>L13000137292</u>	oility Company v	were filed on SEPTEM	BER 30, 2013 and assigned	
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabil	lity company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		16 S ORANGE AVE		
(Principal office address MUST BE A STREET ADDRESS)		SARASOTA, FL 34236		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		16 S ORANGE AVE SARASOTA, FL 34236		
B. If amending the registered agent and/or registered agent and/or the new registered offi		:	eords, enter the name of the new	
	16 S ORANGE AVE			
New Registered Office Address:	Enter Florida street address			
	SARASOTA		, Florida <u>34236</u>	
		City	Zip Code	
New Registered Agent's Signature, if changing Re	gistered 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 thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

MGR = Manager

MGRM = Managing Member

Type of Action <u>Title</u> <u>Name</u> **Address** STEPHEN PILEGGI **MGR** 16 S ORANGE AVE, SARASOTA, FL 34236 Remove TROY H. MYERS, JR. MGR 2033 MAIN ST STE 600, SARASOTA, FL 34237 Remove Remove Add Remove

D. İf amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated NO	/EMBER 14 , 2013
	Man
-	Signature of a member or authorized representative of a member
	TROY H. MYERS, JR.
_	Typed or printed name of signee

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Filing Fee: \$25.00