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2014 SEP -8 PM 3: 50

K.SALY EXAMINER SEP 11 2014

LAIRD A. LILE, P.A.

ATTORNEY AND COUNSELLOR AT LAW 3033 Riviera Drive, Suite 104 Naples, Florida 34103

Laird A. Lile, Esq.
Board Certified Attorney in

Wills, Trusts & Estates Law Fellow of American College of Trust and Estate Counsel Telephone 239.649.7778
Facsimile 239.649.7780
LLile@LairdALile.com
www.LairdALile.com

September 3, 2014

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

RE:

NOSKNAB, LLC

Florida Document No. L14000132570

Dear Sir or Madam:

Please find enclosed the Articles of Amendment for NOSKNAB, LLC and related filing fee in the amount of \$25.00. Thank you for your assistance.

Very truly yours,

Sydney A. Smith

Enclosures

cc:

Christopher Middlebrook (w/enc.) via e-mail

Laird A. Lile, Esq.

COVER LETTER

TO: Registration Se Division of Cor			
NOS	KNAB, LLC		·
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ndence concerning this matter	to the following:	
	Laird A. Lile	, Esq.	
		Name of Person	
	Laird A. Lile	, P.A.	
		Firm/Company	
	3033 Riviera	a Drive, Suite 10	4
		Address	
	Naples, Flor	ida 34103	
		City/State and Zip Code	
•	LLile@LairdALile.	COM to be used for future annual report notif	ication)
For further information c	oncerning this matter, please co		
Laird A. Lile	e, Esq.	_{at} 239 649-7	778
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 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

2014 SEP -8 PM 3:50
TALLAHASSEE, FLORIDA

NOSKNAB, LLC

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

The Anticies of Organization for this Emilied E	iability Company	were filed on Augus	st 23, 2014 and assigned
Florida document number L1400013257	0		
This amendment is submitted to amend the fol-	lowing:		
A. If amending name, enter the new name o	of the limited liab	ility company here:	
Not Applicable			
The new name must be distinguishable and end with the	words "Limited Lial	oility Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	Not Applicable)
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		3945 Old Lovi	ng Road
(Mailing address MAY BE A POST OFFICE BOX)		Morganton, Georgia 30560 US	
B. If amending the registered agent and registered agent and/or the new registered of		<u>e</u> :	records, enter the name of the new
Name of New Registered Agent:	140t Applic		
New Registered Office Address:	Not Applic		
New Registered Office Address:	Not Applic	Enter Florida str	eet address
New Registered Office Address:	Not Applic	Enter Florida str	
New Registered Office Address: New Registered Agent's Signature, if changing		Enter Florida str City	

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u> Fitle</u>	Name	Address	Type of Actio
MGR	Christopher Middlebrook	3945 Old Loving Road, Morganton, Georgia 3056	60 US ■ Add
			Remove
MGR	Christopher Bankson	3945 Old Loving Road, Morganton, Georgia 30560 US	
		· · ·	Remove
			Remove 7
			PAdd 3. 5
			□ Add
	· .		
	~		□ Remove

ii amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	e date, if other than the date of filing: (optional) ve date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after a document is filed by the Florida Department of State)
ated	Ag 31 , 2014
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00