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COVER LETTER

| TO: Registration Section Division of Corporations |
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| SUBJECT: Cheur Golf AND Ashletic Club Name of Limited Liability Company |
| The enclosed Articles of Amendment and fec(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Name of Person |
| Cheen GOLF + AMETIC Clus Firm/Company |
| 4704 WE BODGETUX Address |
| |
| City/State and Zip Code LKING Q CheVIAC: Com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Any King Viname of Person at (813) 205-1863 Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\ \times \t |
| |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

Liability Company as it now appears on our records. Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 Florida City 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 605, 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

<u>Authorized Member being added or removed from our records:</u>

MGR = Manager

| $\mathbf{AMBR} = A$ | Authorized Member | | |
|---------------------|-------------------|---------------------------------------|---|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| | | DINEDIN, FT 34658 | Remove |
| AP | Lany King In | 4704 AVE BONDENX LUTZ, FT 3355 | _ Add |
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Page 3 of 3

Filing Fee: \$25.00

