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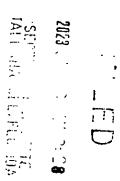
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COVER LETTER

10.	Division of Cor						
	FOUR M &	S,LLC					
SUBJE	:СТ:						
		Name of Lim	ited Liability Company				
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
		William R. "Ricky" Moulto	n				
			Name of Person				
			Firm/Company				
		4372 Benchmark Trace			5.0	2	
			Address		# <u>#</u>	2023	
		Tallahassee, FL 32317			÷.	,	•
		Ricky@ArmorRealty.com	City/State and Zip Code		4.312	· :	1
		E-mail address: (to be used for future annual report notification	1)	<u>.</u>	.2	
For fur	ther information c	oncerning this matter, please co	all:			<u>.</u>	
Ricky I	Moulton		850 528-7221				
-	Name o	f Person	at () Area Code Daytime Telep	hone Number			
Englose	ad is a shock for th	ne following amount:					
				∃ 6 /0 00 53			
\$2:	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status		
	Mailing Addres		Street Address: Registration Section				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOUR M & S, 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 _____ and assigned Florida document number _____120000073075 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 4372 Benchmark Trace Enter new principal offices address, if applicable: Tallahassee, FL 32317 (Principal office address MUST BE A STREET ADDRESS) 4372 Benchmark Trace Enter new mailing address, if applicable: Tallahassee, FL 32317 (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: William R. Moulton

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

4372 Benchmark Trace

Tallahassee

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida 32317
Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Brittney A. Moulton	4372 Benchmark Trace	
		Tallahassee, FL 32317	□Add
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