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COVER LETTER

TO:	Registration Section Division of Corporation		•		
SUBJECT: B 4					
The en	closed Articles of An	nendment and fee(s) are sub	omitted for filing.		
Please	return all corresponde	ence concerning this matter	to the following:		
		Heather	Name of Person		
			Firm/Company		
		14900 (Jamp Manderess	ive Rd	#74
		LARP WA CTAIDE E-mail address:	•	le	
For fur	ther information conc				
He,	Ather De Name of Pe	uhl C	at (<u>UIG</u>) Area Code	937-52 Daytime Teleph	94 one Number
Enclos	ed is a check for the f	ollowing amount:			
Y <u>—</u> 83	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fe Certified Copy (additional copy is		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address: 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

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 "LLC." 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 regagent and/or the new registered office address here:		ws LLC	
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 "LLC." 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 the Limited (A	Liability Company as it now appears on our Florida Limited Liability Company)	records.)
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 "LLC." 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 regardent and/or the new registered office address here:	The Articles of Organization for this Limited Liabi	ility Company were filed on <u>12-124</u> 0350	124 and assigned
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 regagent and/or the new registered office address here:	This amendment is submitted to amend the following	ing:	
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 regagent and/or the new registered office address here:	A. If amending name, enter the new name of th	ne limited liability company here:	
(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 regagent and/or the new registered office address here:	The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new regagent and/or the new registered office address here:	Enter new mailing address, if applicable:		131
agent and/or the new registered office address here:	(Mailing address MAY BE A POST OFFICE BO	<u></u>	が Sign of
Name of New Registered Agent:			enter the name of the new regists
Courte of the Control of Lights	Name of New Registered Agent:		
New Registered Office Address: Enter Florida street address	New Registered Office Address:	Enter Florida street	address
, Florida			. Florida
City Zip Code	-	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

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>	Address	Type of Action
			□Add
			□Remove
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	of owner	/Ship or	n LLC only	<i>Y</i>	
_	MGR	Heather	Deuble	9000	-91
_	MHR	Billy	Druble	10 Dlo.	-10
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_					
n effect ote: If	the date inserted in this l	ust be specific and cannot block does not meet the	be prior to date of filing or more to applicable statutory filing re	(optional) han 90 days after filing.) Purquirements, this date will	suant to 605.02
	= -		records. ective time, at 12:01 a.m. on t	he earlier of: (b) The 90	th day after th
		1025	or authorized representative of a		

Filing Fee: \$25.00