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SECRETARY OF STATE TALLAHASSEE FLORIDA

NATE A

T. CLINE

JUN 2 1 2010

EXAMINER

Division of Corporations		
SUBJECT: BIG DADAY MAIL COMPANY LLC		
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:		<i>, ,</i>
Linda Aponte Name of Person		
Big Dady Mail Company, LLC		
8120 Bewedere Rd - Ste 2	ZOIO.	erman pro-
West Palm Beach FL 33411 City/State and Zip Codel	ZOIO JUN 18 SECRETARY I	
Jima A the run - gross Com E-mail address: (to be used for future innual refort notification)	AM D 47 OF STATE E. FLORID	13
For further information concerning this matter, please call:	TAIE ORIDA	
Linda Aponte at (501) 791-7550 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
(additional copy is enclosed) Certified (of Status &	d)

TO:

Registration Section

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

BIG DADLY MATE	COMPANY, LLC	
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our recornited Liability Company).	<u>(ds.</u>)
The Articles of Organization for this Limited Liability Con	npany were filed on 4112120	and assigned
Florida document number MO700003137.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	~ -
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		NS Z
(Principal office address MUST BE A STREET ADDRES	SS)	
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	t r	SECONOMIC SECONO
Enter new mailing address, if applicable:		77
(Mailing address MAY BE A POST OFFICE BOX)		0.A
		Dr. 17
	•	-
B. If amending the registered agent and/or register registered agent and/or the new registered office address		enter the name of the new
	:	
Name of New Registered Agent:		
La Paris de Company		
New Registered Office Address:	Enter Florida str	reet address
	Flor	rida
	City , Flor	Zip Code
N. D. J. C. M. A. C.	A	

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 608, 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 the or Managing I	he Managers or Managing Members o Member being added or removed from	n our records	ds, <u>enter the title</u>	name, and	address of each	Manager
MGR = Mana			***************************************			
Title .	<u>Name</u>	<u>Address</u>	1,	† †	Type of	Action
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<u>ngr</u> m	George Ford	BI20 Svite West	Belveder 2 Polm	e Rd Beach, F	Add ☐ Remo	ove >49
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					ZBIRAD SECRETARY OF ALLAHASSEE, F	NO.
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D. If amendin	ig any other information, enter change((s) here: <i>(At</i>	tach additional sh		Remo	ve
K	ent Bonghman- other with 51%	1770	now		jority	
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Dated	15/2010		Jar		***************************************	
	Signature of a member of a mem	or authorized r	epresentative of a n	nember		

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Filing Fee: \$25.00