M11000001512

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | |
| (Ad | (Address) | |
| | | /0 |
| (Cit | ty/State/Zip/Phone | ÷#) |
| PICK-UP | WAIT | MAIL MAIL |
| (Bu | isiness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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2011 JUL 20 AH 8: 08

SECRETARY OF STATE
TALL AHASSEF FI ORIDA

J. SAULSBERRY EXAMINER JUL 21 2011

COVER LETTER

| SUBJECT: | FREESTONE | TRADING LL | • ~ | | |
|---------------------------|---|---|---|----------------------|-------|
| | | ited Liability Company | | | |
| The enclosed Articles of | of Amendment and fee(s) are sui | bmitted for filing. | | | |
| Please return all corresp | pondence concerning this matter | r to the following: | | | |
| | PHILIP K | (ENIHAN Name of Person | | | |
| | FREESTO | NE TRADING Firm/Company | LLC | | |
| | | 8TH PLACE, | SUITE E | 201 201 | |
| .· • | CAPE COR | City/State and Zip Code Ofhouse.com.ac to be used for future annual report notifica | 990 EAHAUSE | 2011 JUL 20 AM 8: 08 | |
| | E-mail address: (concerning this matter, please of | | tion) | AH 8: C | |
| Philip | Kenihan | at (| 18 990 2 | 31 | |
| Enclosed is a check for | the 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 Certificate of Certified Co (additional) | of Status & | osed) |
| | LING ADDRESS: stration Section | STREET/COURIER Registration Section | R ADDRESS: | | |

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

Registration Section Division of Corporations

TO:

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| FREESTONE TRAD | • • • | |
|---|---|--|
| (Name of the Limited Liability Compa- (A Florida Limited L | ny as it now appears on our recordiability Company) | <u>s.</u>) |
| (A Florida Limited Lability Company) Florida document number M 1100001512 This amendment is submitted to amend the following: | were filed on $\frac{03/24/2}{2}$ | 2011 Blood assembled LLAHA |
| This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab | | JUL 20 AM 8: (RETARY OF STATA AHASSEE, FLOR |
| The new name must be distinguishable and end with the words "Limit "L.L.C." | ted Liability Company," the designat | ion "LLC" by the abbreviation |
| Enter new principal offices address, if applicable: | 1202 SE 8TH F | PLACE |
| (Principal office address MUST BE A STREET ADDRESS) | SUITE B | |
| | 1202 SE 8TH F SUITE B CAPE CORAL, F | L , 33990 |
| Enter new mailing address, if applicable: | 1202 SE 8TH PL | ACE |
| Mailing address MAY BE A POST OFFICE BOX) | SUITE B | |
| | CAPE CORAL, FL | ., 33990 |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | | ter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florid | a Zip Code |
| | City | Zip Code |

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 Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| Title | Name | Address | Type of Actio | <u>n</u> |
|--------------|--|---|----------------|----------|
| <u>mgr</u> | RICHARD E. FAGAN | 10945 SOUTH STREET SUITE 106 A CERRITOS CA, 90703 | Add Remove | |
| MGR | PHILIP KENIHAN | 1202 SE 8TH PLACE SUITE B CAPE CORAL, FL, 33990 | Add Remove | |
| | | | Add Remove | • |
| D. If amendi | ng any other information, enter change | (s) here: (Attach additional sheets, if necessary,) | ZOII JUL 20 AM | |
| | | FLORIDA | 8: 08 |) |
| Dated 2 | 7 TH JUNE 201 | | | |
| | PHILLP KENIHAN | or authorized representative of a member | | |
| - | Typed o | or printed name of signee | | |

Page 2 of 2

Filing Fee: \$25.00