

L11000096828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

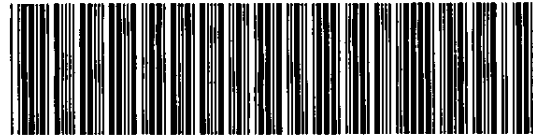
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FEB 11 2014
11:32 AM
MILWAUKEE COUNTY
CLERK OF COURTS

J. Stivers FEB 0 2014

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2014

MARK ALLEN
160 SAN MARCO BLVD
ST AUGUSTINE, FL 32084

SUBJECT: MARK ALLEN ENTERPRISES, LLC
Ref. Number: L11000096828

We have received your document for MARK ALLEN ENTERPRISES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable. **Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 714A00000680

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WERNER TSA, 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:

MARK ALLEN

Name of Person

Firm/Company

160 SAN MARCO BOULEVARD

Address

ST. AUGUSTINE, FL 32084

City/State and Zip Code

mark@powersportsleader.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Allen at (**904**) **540-0933**
Name of Person Area Code Daytime Telephone Number

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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

January 31, 2014

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

RE: Ref. Number L11000096828 and L13000176893


Dear Sir or Madam:

On December 26, 2013, Mark Allen Enterprises, LLC (Reference No. L13000176893) was created on my behalf in error and, therefore, dissolved on December 30, 2013.

I hereby waive any conflict which might be created by my request to change the name of Werner TSA, LLC (Reference No. L11000096828) to Mark Allen Enterprises, LLC.

Additionally, the Articles of Amendment to Articles of Organization for Werner TSA, LLC previously provided to you and returned with your letter dated January 10, 2014, were prepared with the incorrect address for Mark Allen and Mark Allen Enterprises, LLC. The document is being returned to you showing the corrected address: 164 San Marco Boulevard, St. Augustine, FL 32084.

Sincerely,

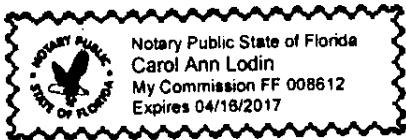


Mark Allen

TALLAHASSEE COUNTY
14 FEB -4 PM 10:32

STATE OF FLORIDA
COUNTY OF ST. JOHNS

Subscribed and sworn to before me, and personally known by me or _____ provided _____ as identification, this _____ day of January 2014.



Carol Ann Lodin
Notary

My Commission Expires: 4-18-17

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

WERNER TSA, 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 08/23/2011 and assigned Florida document number L11000096828.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MARK ALLEN ENTERPRISES, LLC

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)

164
160 SAN MARCO BOULEVARD
ST. AUGUSTINE, FL 32084

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P. O. BOX 3178
PONTE VEDRA BEACH, FL 32004

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:

MARK ALLEN

New Registered Office Address:

164
160 SAN MARCO BOULEVARD

Enter Florida street address

ST. AUGUSTINE, Florida 32084

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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

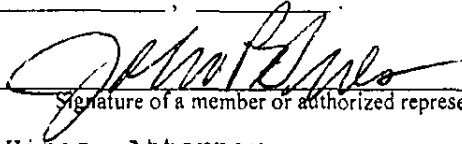
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRP	CURTIS G. WERNER	200 MANSELL COURT EAST	<input type="checkbox"/> Add
		SUITE 510	<input checked="" type="checkbox"/> Remove
		ROSWELL, GA 30076	
S	LISA CALABRO	200 MANSELL COURT EAST	<input type="checkbox"/> Add
		SUITE 510	<input checked="" type="checkbox"/> Remove
		ROSWELL, GA 30076	
MGRP	MARK ALLEN	160 164 SAN MARCO BOULEVARD	<input checked="" type="checkbox"/> Add
		ST. AUGUSTINE, FL 32084	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: January 1, 2014 (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated December 30, 2013



Signature of a member or authorized representative of a member

John P. Hines, Attorney

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

14 FEB -4 PM 6:32
TALLAHASSEE, FLORIDA