

LO2 000017040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

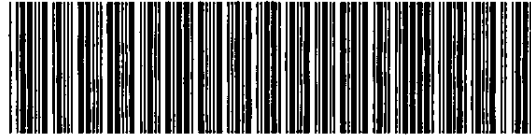
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900245228249

03/08/13--01013--008 **25.00

APR - 1 2013

T CLINE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 MAR 29 PM 3:07

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 11, 2013

KENNETH FEDERMAN
KERSTEIN, COREN ET AL, LLP
60 WALNUT ST., SUITE 400
WELLESLEY, MA 02481

SUBJECT: CAMLAKE, LLC
Ref. Number: L02000017040

We have received your document for CAMLAKE, 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):

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return 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.

Tammi Cline
Regulatory Specialist II

Letter Number: 413A0000567

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 MAR 29 PM 3:07

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAMLAKE, 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:

Kenneth S. Federman
Name of Person

Kerstein, Coren et al, LLP
Firm/Company

60 Walnut St. Suite 400
Address

Wellesley, MA 02481
City/State and Zip Code

kfederman@kcl-law.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth S. Federman at **(781) 997.1600**
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 MAR 29 PM 3:07

FILED

KERSTEIN, COREN & LICHTENSTEIN LLP

Attorneys at Law
60 Walnut Street, Suite 400
Wellesley, MA 02481

Kenneth S. Federman, Esq.
kfederman@kcl-law.com

+ Admitted MA, NH, CT

Main: (781) 997-1600
Direct Dial: (781) 997-1610
Telefax: (781) 997-1633

March 26, 2013

Florida Dept of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Re: **Camlake, LLC**

Dear sir/madam:

Enclosed are (i) Articles of Amendment to Articles of Organization for Camlake, LLC and (ii) a photocopy of your letter dated March 11, 2013.

Kindly process the enclosed Articles of Amendment.

Many thanks.

Very truly yours,


Kenneth S. Federman

cc: Stuart Rader, Esq. (w/ encls.)

2013 MAR 29 AM 3:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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

CAMLAKE, 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 July 8, 2002 and assigned Florida document number L02000017040.

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 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)

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 New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

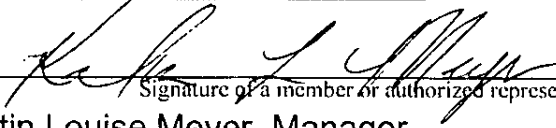
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Kenneth S. Federman	KCL, LLP, 60 Walnut Street	<input type="checkbox"/> Add
		Wellesley, MA 02481	<input checked="" type="checkbox"/> Remove
MGR	Joan Alessandra Meyer	282 Court Street, Apt 2	<input checked="" type="checkbox"/> Add
		Brooklyn, NY 11231	<input type="checkbox"/> Remove
MGR	Kristin Louise Meyer	71 Lafayette Ave, Apt 2R	<input checked="" type="checkbox"/> Add
		Brooklyn, NY 11217	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
 FILED
 2013 MAR 29 PM 07
 ALBANY, NY

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated February 12, 2013



Signature of a member or authorized representative of a member

Kristin Louise Meyer, Manager

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 MAR 29 PM 3:07
SECRETARY OF STATE
PAUL ANNA SHERN, FLORIDA

FILED