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OCT 27 2008

EXAMINER



400137172404

10/23/08--01028--014 **60.00

08 OCT 24 PMI2: 09

COVER LETTER

SUBJECT: Panther		ited Liability Company)			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	Daniel Sirlin				
		(Name of Person)			
	Panther Belvedere, LLC				
		(Firm/Company)			
	333 South Miami Avenue, Suite 150				
		(Address)			
	Miami, Florida 33130				
		(City/State and Zip Code)			
For further information concerning this matter, please call:					
Daniel Sirlin	at (_305) 374-7075 ext. 228				
(Name of	Person)	(Area Code & Daytime T	elephone 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

Registration Section Division of Corporations

TO:

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

Panther Belvedere, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our record Limited Liability Company)	ls.)
The Articles of Organization for this Limited Liability (Company were filed on November 12, 200	og and assigned
Florida document number L03000043952	 ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
Panther Development Services, LLC		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		BO SE
(Principal office address MUST BE A STREET ADDI	RESS)	OC ORE
		2 ⁹
Enter new mailing address, if applicable:		20 AE
(Mailing address MAY BE A POST OFFICE BOX)		6 42
		9 07
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	stered office address on our records, <u>e</u> l <u>ress here</u> :	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida stre	et address)
	, Floric	
	(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 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 **Type of Action** <u>Title</u> <u>Name</u> **Address** _ Add ☐ Add Remove _ Add Remove ☐ Add **□** Add Remove Add . 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated October 22 ature of a member or authorized representative of a member

Page 2 of 2

Daniel Sirlin

Filing Fee: \$25.00

Typed or printed name of signee