

L03000055561

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)


\_\_\_\_\_  
(City/State/Zip/Phone #)

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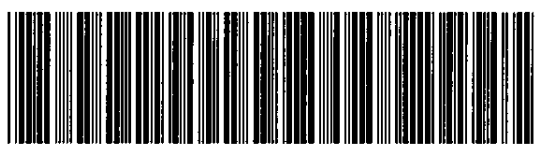
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PARADISE PROPERTY OF BONITA, L.L.C.  
(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:

ROBERT DIMODICA  
(Name of Person)

PARADISE PROPERTY OF BONITA, L.L.C.  
(Firm/Company)

1316 GRAND CANAL DRIVE  
(Address)

NAPLES, FL 34109  
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT DIMODICA at ( ) \_\_\_\_\_  
(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

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

PARADISE PROPERTY OF BONITA, L.L.C.

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on DECEMBER 23, 2003 and assigned document number L03000055561.

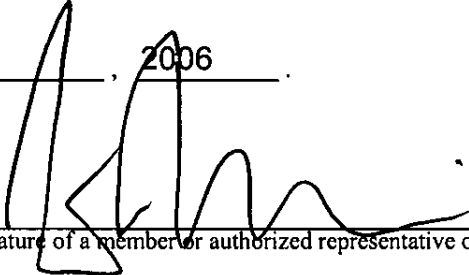
**SECOND:** This amendment is submitted to amend the following:

Article V: Remove Christopher  
Johnson as mgm.

06 DEC -4 PM 2:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

Dated AUGUST 15TH, 2006

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

ROBERT A. DIMODICA

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**