

L04000021648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

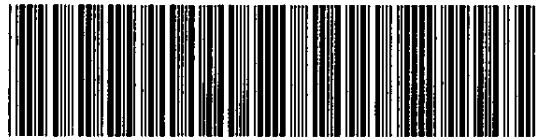
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN

NOV 17 2009

EXAMINER



CLARK, CAMPBELL, MAWHINNEY & LANCASTER, P.A.

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November 12, 2009

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Florida 32314

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Re: Chamax, LLC, a Florida limited liability company

To Whom it May Concern:

Enclosed is the original and one (1) copy of the Articles of Amendment to the Articles of Organization of Chamax, LLC, a Florida limited liability company, changing the manager ("Amendment"). Also enclosed is this firm's check number 30742 in the amount of \$25.00 for the filing fee. If acceptable, please file the Amendment and return the original Amendment to our office.

Thank you for your prompt attention to this matter. If you have any questions or comments, please do not hesitate to contact me.

Sincerely,

William T. Link, Jr.

WTL/ndc
Enclosures
Certified Mail Return Receipt: 7006 0810 0004 1618 6963

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CC MANATEE DEVELOPMENT, 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:

William T. Link, Esquire
Name of Person
CC MANATEE DEVELOPMENT, LLC
Firm/Company
500 South Florida Avenue, Suite 700
Address
Lakeland, Florida 33801
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

William T. Link, Esquire at (863) 647-5337
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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CC MANATEE DEVELOPMENT, 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 March 22, 2004 and assigned Florida document number L04000021648.

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:

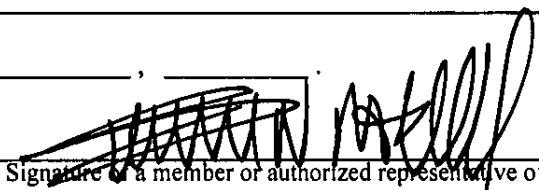
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	TA Family Partnership Ltd	500 South Florida Avenue Suite 700 Lakeland, Florida 33801	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	LAWRENCE W MAXWELL	500 South Florida Avenue Suite 700 Lakeland, Florida 33801	<input checked="" type="checkbox"/> Add <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
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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 TALLAHASSEE, FLORIDA

Dated _____



 Signature of a member or authorized representative of a member
 Lawrence W. Maxwell

 Typed or printed name of signee