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| (Re | equestor's Name) | |
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SECRETARY OF STATE

J. BRYAN

JUL 27 2010

EXAMINER

COVER LETTER

| 10: | Registration 8 Division of Co | | , | |
|---------|---------------------------------|--|--|--|
| SUBJE | ECT: | Land I | Baron III, LLC | |
| | | Name of Lim | ited Liability Company | |
| | | f Amendment and fee(s) are sul | _ | |
| | | | Victoria DeBonis | |
| | | | Name of Person | · |
| | 4 | | Land Baron III, LLC | For 7 |
| | | | Firm/Company | LEGR T |
| | 1371 Sawgrass Corporate Parkway | | HASS | |
| | | | Address | JUL 26 PMI CRETARY OF CAHASSEE. F |
| | | | Sunrise, FL 33323 | JUL 26 PM 12: 30 JUL 26 PM 12: 30 ECRETARY OF STATE LLAHASSEE, FLORID |
| | | via | City/State and Zip Code | REFERENCE |
| | • | E-mail address: (| toria@land-baron.com to be used for future annual report notification | n) |
| For fur | ther information | concerning this matter, please of | call: | |
| | Dr | ew C. Rosen | at (954) 765 | -6999 |
| | Name | of Person | Area Code & Daytime Tele | |
| Enclose | ed is a check for | the following amount: | | |
| \$25 | .00 Fiting 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) |
| | Regist Divisi P.O. E | tration Section on of Corporations Box 6327 eassee, FL 32314 | STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center of Tallahassee, FL 32301 | s |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| · | Land Baron III, LLC | | | |
|---|--------------------------------------|--------------------------|---------------------|--|
| (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | | | | |
| (A | riorida Limited Liability Company) | | | |
| The Articles of Organization for this Limited Lie | ibility Company were filed on | 6/09/2004 | _ and assigned | |
| Florida document number L04000043 | 435 | | | |
| Torred document (unitable) | • | | | |
| This amendment is submitted to amend the folio | wing: | | | |
| A. If amending name, enter the new name of | the limited liability company here: | | | |
| | | -, | | |
| | | | | |
| The new name must be distinguishable and end with "L.L.C." | the words "Limited Liability Company | "," the designation "LLC | or the abbreviation | |
| Enter new principal offices address, if applica | ble: | 7 | <u>n</u> 5 | |
| (Principal office address MUST BE A STREET | (ADDRESS) | | | |
| | | 7 | | |
| | | | 75 6 | |
| | | ' | 影っ門 | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE B | ROY | | 100 | |
| IMMINING WANTED WITH DE TITOUT OF THEE E | <u></u> | | - FE | |
| | | | P | |
| | | | | |
| B. If amending the registered agent and/o | | records, enter the | name of the new | |
| registered agent and/or the new registered off | <u>ice address here</u> : | | | |
| | | | | |
| Name of New Registered Agent: | Drew C. Rosen | 1 I | | |
| Name of New Registered Agent: | Diew C. Roseii | | | |
| New Registered Office Address: | | | | |
| | Enter | Florida street addres | S | |
| | | | | |
| | | , Florida | | |
| | City | | Zip Code | |
| New Desistand Agentle Signature if shousing D | | | | |

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, Thereby 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action | |
|---------------------------------|--|---|------------------|--|
| MGRM | Drew C. Rosen | 1371 Sawgrass Corporate Parkway Sunrise, Fl. 33323 | Add Remove | |
| · | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| | ending any other information, enter chang Change Brian Gordon from MGRM t | ge(s) here: (Attach additional sheets, if necessary.) o MGR | - 10 | |
| - | | | FILI JUL 26 I | |
| Dated | D | <u>010</u> . | PH IZ: 30 | |
| | | r or authorized representative of a member | | |
| | | Drew C. Rosen | | |
| Typed or printed name of signee | | | | |

Page 2 of 2

Filing Fee: \$25.00