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نيو: المام	(Requestor's Name)
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G. MCLEOD

APR 1 6 2008

EXAMINER

COVER LETTER

SUBJECT: TUSC	AN GULF PROPERTY LI (Name of Lim	ited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
3 2 2 2			
Signal Artist Control of the Control	BRENT FOSTER		<u>. </u>
	•	(Name of Person)	*
**			
•		(Firm/Company)	
	18310 GLENN HAVI	EN ESTATES DR	
· a _s	10010 3221111111111	(Address)	
	SPRING, TX 77379	1	
	<u> </u>	(City/State and Zip Code)	
r Fan Garde and In Comment		·	
For further information	n concerning this matter, please of	an:	
BRENT FOSTER	₹	at (832) 257-8455	
, (Nan	ne of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check fo	r 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

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



TUSCAN GULF PROPERTY	YLLC	
(Name of the Limited (A	Liability Company as it now appears on our reco Florida Limited Liability Company)	<u>ords.</u>)
·	• • •	
The Articles of Organization for this Limited Lia	ability Company were filed on 01/14/2005	and assigned
Florida document number <u>L0500004683</u>	 •	
And The Control of th		
This amendment is submitted to amend the follo	wing:	
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 design	gnation "LLC" or the abbreviation
"L.L.C."		•
•		
B. If amending the registered agent and/o registered agent and/or the new registered off	r registered office address on our records, ice address here:	enter the name of the new
registered agent and/or the new registered of	ice address nere.	
Name of New Registered Agent:		
Nov. Buristanad Office Address.		
New Registered Office Address:	(Enter Florida s	street address)
ing. Nasa	El	
	(City)	orida (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 **Type of Action** <u>Name</u> **Address** <u>Title</u> **BRENT L FOSTER MGRM** 18310 GLENN HAVEN ESTATES DR ✓ Remove SPRING, TX 77379 JANICE T FOSTER 18310 GLENN HAVEN ESTATES DR SPRING, TX 77379 MGRM MGRM_ TAHOE FINANCIAL LP 18310 GLENN HAVEN ESTATES DR SPRING, TX 77379 Remove Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated APRIL 10 2008

Typed or printed name of signee

JANICE T. FOSTER

Page 2 of 2

Filing Fee: \$25.00