L05000059631

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Ві	usiness Entity Nar	me)		
(Document Number)				
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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APR 1 5 ZING

J. BRYAN

MAY 1 2 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CHRC INVESTMEN	ITS 211, LLC
(Name of Limited Lia	bility Company)
The enclosed Articles of Amendment and fee(s) are submitted f	or filing.
Please return all correspondence concerning this matter to the fe	ollowing:
CHARLES ON	HARMON ame of Person) NEW NAME 7 MILE
74. 3F	T MILE
CHRC INVESTM	NENTS 211, LLC PROPERTIES LL
174 WATERCO	LUR WAY SUITE 201
SANTA ROSA BI	EACH FL 32459
Chyrs	are and Zip Code)
For further information concerning this matter, please call:	NA SECUL
CHARLES HARMON	at 678, 231 - 1101 - SAFE
(Name of Person)	(Area Code & Daytime Telephone Number)
	(Area Code & Daytime Telephone Number) PH 3: 42 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	+2 0NS
Certificate of Status (5.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 15, 2008

CHARLES HARMON CHRC INVESTMENTS 211, LLC 174 WATERCOLOR WAY SUITE 201 SANTA ROSA BEACH, FL 32459

SUBJECT: CHRC INVESTMENTS 211, LLC

Ref. Number: L05000059631

We have received your document for CHRC INVESTMENTS 211, LLC and your check(s) totaling \$30.00. However, the document has not been filed and is being retained in this office for the following:

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2007 through 2008;and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$377.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 608A00022359

Joey Bryan Regulatory Specialist II SECRETARY OF STATIONS
SECRETARY OF CORPORATIONS
OB HAY -9 PM 3: 42

ARTICLES OF AMENDMENT TO

0 20

ARTIC	CLES OF ORGANIZATION OF	B HAY -
(Name of the Limited)	ESTMENTS 211, L Liability Company as It now appears on our Florida Limited Liability Company)	records.) PH 3: 15 2005
The Articles of Organization for this Limited Liz Florida document number $\bot \phi 5 \phi \phi \phi$	ability Company were filed on JUNE 59631	15, 2005 and assigned 25
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of 7 MILE PROPERTIES The new name must be distinguishable and end with "L.L.C."	LLC	lesignation "LLC" or the abbreviation
B. If amending the registered agent and/o registered agent and/or the new registered off		rds, <u>enter the name of the new</u>
Name of New Registered Agent: New Registered Office Address:	174 WATERCOLOR 1 (Enter Flora SANTA ROSA BEACH (City)	ida street address)
	(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 = MGRM	Manager = Managing Member		
Title ,	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
-			Add Remove
			Add Remove
			Add Remove
D. If am		nter change(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE OIVISION OF CORPORATIONS 08 MAY -9 PH 3: 42
Dated	April 8	, 2008 forty	7 5
	Signature of CHARLES	of a member or authorized representative of a member HARMON Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00