

LOS 000060035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

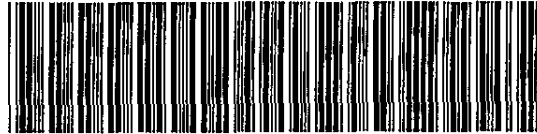
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000056389780

06/24/05--01017--004 \*\*25.00

FILED  
05 JUN 24 AM 8:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan JUN 30 2005



SQUIRE, SANDERS & DEMPSEY L.L.P.

One Tampa City Center  
201 N. Franklin Street, Suite 2100  
Tampa, Florida 33602-5813

Office: +1.813.202.1300  
Fax: +1.813.202.1313

Direct: +1.813.202.1339  
jdedwards@ssd.com

June 22, 2005

Registration Section  
Florida Department of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

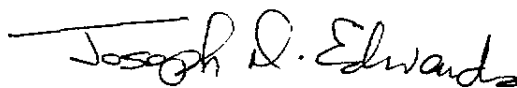
Re: *Splendor-Naples, LLC*

Dear Sir or Madam:

The enclosed *Articles of Amendment to the Articles of Organization* for the above-referenced limited liability company is hereby submitted for filing. Also enclosed is a check payable to the **Florida Department of State** in the amount of \$25.00 for the filing fee. Please return all correspondence concerning this matter to my attention.

If you have any questions, please do not hesitate to give me a call.

Cordially,

  
Joseph D. Edwards

JDE/JAH  
Enclosure  
Tampa/42698.1  
55724.00007

Signed for Mr. Edwards  
in his absence to prevent  
delay in mailing.

FILED  
05 JUN 24 AM 8:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Splendor-Naples, LLC  
(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on June 16, 2005 and assigned document number L05000060035.

**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:


Article I

The name of the Limited Liability Company is:

Splendour-Naples, LLC

FILED  
05 JUN 24 AM 8:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated June 20, 2005.

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

Joseph D. Edwards

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

Filing Fee: \$25.00