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SECRETARY OF STATE

COVER LETTER

то:	Registration Sec Division of Corp					
SUBJE	r c ⊤∙					
30031			AYTONA, LLC ited Liability Company		_	
The en	closed Articles of A	Amendment and fee(s) are su	bmitted for filing.			
Please	return all correspon	ndence concerning this matte	r to the following:			
			Jeffrey J. Pardo, Esq.		<u> </u>	
			Name of Person		2009 MAY 21 SECNETAR TALLAHASS	
Pardo & Gainsburg, LLP			CAL			
			Firm/Company		TAR HASS	1
	2 South Biscayne Blvd, Suite 2475			Y Of		
	Address				AM II: 22 OF STATE EF, FLORID	(
	Miami, FL 33131			22 RIDA		
		City/State and Zip Code				
		E-mail address: (pardolaw@gmail.com (to be used for future annual repo	ort notification)	_	
For fur	ther information co	oncerning this matter, please	call:			
	Jeffrey Name of	J. Pardo, Esq.	at (305) Area Code &	358-1001 Daytime Telephone Num	ber	
		e following amount:	——————————————————————————————————————	—	מ יויים	
[√] \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	Certifi nclosed) Certif	Filing Fee, icate of Status & ied Copy is encl	losed)
	Registra	NG ADDRESS:	Registration		:	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Clifton Buil	Corporations ding tive Center Circle		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SJF	P DAYTONA, LLC				
(Name of the Limited Liab (A Flori	lity Company as it now appears da Limited Liability Company)	on our records.)			
The Articles of Organization for this Limited Liability	y Company were filed on	08/16/2005	_ and assigned		
Florida document number L05000080423	.				
This amendment is submitted to amend the following	:				
A. If amending name, enter the new name of the l	imited liability company here	:			
	ONA RIDGEWOOD, LLC		<u> </u>		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compan	y," the designation "LL	C" or the abbreviation		
Enter new principal offices address, if applicable:	 	A THE			
(Principal office address MUST BE A STREET AD	DRESS)		<u>N</u>		
		<u> </u>	- } 		
Enter new mailing address, if applicable:		22	N		
(Mailing address MAY BE A POST OFFICE BOX)			10		
B. If amending the registered agent and/or req registered agent and/or the new registered office a		r records, <u>enter the</u>	name of the new		
Name of New Registered Agent:		100018			
New Registered Office Address:	Futa	r Florida street addres	N.O.		
Enter Provida street address					
	City	, Florida	Zip Code		
	Cuy		Zip Coae		

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 = M	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add — Remove —
		E CORICA	F S Add
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chan	nge(s) here: (Attach additional sheets, if necessary.) .	
_			<u> </u>
			_
Dated		2009	
	Steven J. Pard	er or authorized representative of a member MGRM ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00