

LOS000119250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

(Business Entity Name)

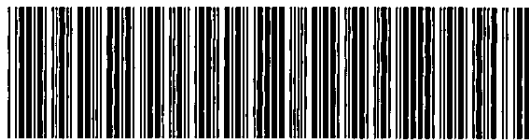
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 FEB 14 AM 9:51

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CL Thomas FEB 15 2008

PINEIRO, WORTMAN & BYRD, P.A.
Attorneys at Law

ANDREW A. PINEIRO
SCOTT J. WORTMAN*
BARRY B. BYRD*

RYAN S. COPPLE
LINDA ROCKER⁴⁰

www.pwbattorneys.com

*Also admitted in New York and New Jersey

*Board Certified Real Estate Attorney

⁴⁰Also admitted in Ohio

^oOf Counsel

February 11, 2008

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

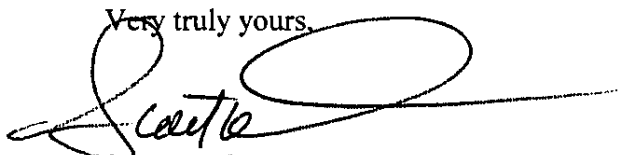
Re: High Fives, LLC

Dear Sir/Madam:

Enclosed please find the completed Articles of Amendment to Articles of Incorporation for High Fives, LLC, for the purpose of changing the corporate name to Academic Realty Group, LLC. Also enclosed is a check in the amount of \$25.00 covering the filing fee for this matter.

Should you have any questions please do not hesitate to contact me.

Very truly yours,


Scott J. Wortman

SJW/mfd

cc: Matt Hollowell *via hand delivery*

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: High Fives, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scott J. Wortman, Esq.

(Name of Person)

Pineiro, Wortman & Byrd, P.A.

(Firm/Company)

4600 Military Trail, Suite 212

(Address)

Jupiter, FL 33458

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Scott J. Wortman, Esq.

(Name of Person)

at (561) 799-9280

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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
(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

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

High Fives, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/14/2005 and assigned
Florida document number L05000119250.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Academic Realty Group, LLC
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:**

Name of New Registered Agent: _____

New Registered Office Address: _____

(Enter Florida street address)

_____, Florida _____
(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)

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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:

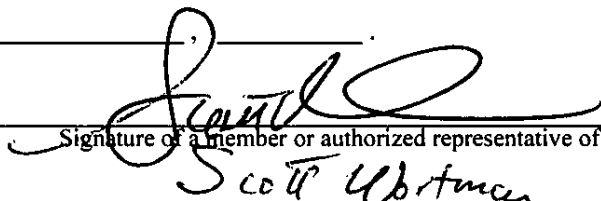
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA

Dated _____



Signature of a member or authorized representative of a member

Typed or printed name of signee