

LD7000124633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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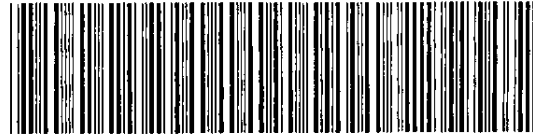
Special Instructions to Filing Officer:

**L. SELLERS**

NOV 17 2010

**EXAMINER**

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**FILED**  
10 NOV 16 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Carthage Properties, 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:

**Catherine H. Lorie**  
Name of Person  
  
Firm/Company  
  
**133 Sevilla Avenue**  
Address  
  
**Coral Gables, FL 33134**  
City/State and Zip Code  
  
**lorie@apachecap.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Catherine H Lorie** at ( **305** ) **285-5588 ext 5726**  
Name of Person 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**

Carthage Properties, 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 December 14, 2007 and assigned Florida document number L07000124653.

This amendment is submitted to amend the following:

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

Tangerine Property Management LLC

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

**Enter new principal offices address, if applicable:**

133 Sevilla Avenue

**(Principal office address MUST BE A STREET ADDRESS)**

Coral Gables, Florida 33134

**Enter new mailing address, if applicable:**

133 Sevilla Avenue

**(Mailing address MAY BE A POST OFFICE BOX)**

Coral Gables, Florida 33134

**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:**

Catherine H Lorie

**New Registered Office Address:**

133 Sevilla Avenue

*Enter Florida street address*

Coral Gables

Florida

*City*

33134

*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.*

Catherine H Lorie

**If Changing Registered Agent, Signature of New Registered Agent**

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TALLAHASSEE FLORIDA

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>
MGRP	Richard C. Dennis	133 Sevilla Avenue Coral Gables, Florida 33134	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated November 8, 2010.

Catherine H Lorie  
Signature of a member or authorized representative of a member

Catherine H Lorie  
Typed or printed name of signee