## L07000127494

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## COVER LETTER

TO: Registration Se Division of Cor		,				
SUBJECT: 804 CAN	YON RANCH LLC					
(Name of Limited Liability Company)						
			,			
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please return all correspon	ndence concerning this matter	r to the following:				
	Jay Phillip Parker					
		(Name of Person)				
	Clear Title Group, LLC					
		(Firm/Company)	-			
1691 Michigan Avenue, Suite 320						
		(Address)				
	Miami Beach, FL 33139					
		(City/State and Zip Code)				
For further information co	ncerning this matter, please c	all:				
Faran Yawer		at ( 305 ) 695-2699				
(Name of	Person)	(Area Code & Daytime T	elephone Number)			
Enclosed is a check for the	e 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

FILED

2008 SEP 23 AM 11: 13

SECRETAR ( OF STATE TALLAHASSEE, FLORIDA

804 CANYON RANCH 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 Liabilit	ty Company were filed on 12/27/2007	and assigned	
Florida document number L07000127494	·		
This amendment is submitted to amend the following	g:	·	
A. If amending name, enter the new name of the	limited liability company here:		
C606 CANYON RANCH LLC '			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the design	gnation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
		<del></del>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	·		
B. If amending the registered agent and/or regregistered agent and/or the new registered office a		enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
		orida	
	(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 = N	Manager = Managing Member		
Title	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
D. If ame	nding any other information, ente	er change(s) here: (Attach additional sheets, if necessary:)	FILED 2008 SEP 23 AMII: 13
– Dated <u>Sept</u>	tember 22, 2008 ,		υ
	Signature of	member or authorized representative of a member	
	Jay Phillip Parke	er, Registered Agent Typed or printed name of signee	_

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Filing Fee: \$25.00