L0800049814

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SEP 172008

EXAMINER

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COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: 1726 Coral Way Partners LLC						
	(Name of Lim	ited Liability Company)				
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.				
Please return all corres	spondence concerning this matter	to the following:				
	Paul G. Schlichte, Esquire					
		(Name of Person)				
	Ray A. Schlichte, Jr., P.A.					
(Firm/Company)						
	2134 Hollywood Boulevard					
		(Address)				
Hollywood, FL 33020						
		(City/State and Zip Code)				
For further informatio	n concerning this matter, please c	all:				
Paul G. Schlichte, Esquire at (954) 923-4604						
(Nan	ne of Person)	(Area Code & Daytime T	elephone Number)			
Enclosed is a check fo	r 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)			
Reg Đivi P.O.	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente	ons			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1762 CORAL WAY PARTNERS LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v	
Florida document number L08000049814	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	(L) 8
Negistered Office / Iduless.	(Enter Florida street address)
	(g) 5 F
	(City), Florida
New Registered Agent's Signature, if changing Registered Agent:	
The Registered Agent 3 Signature in changing registered Agent.	32 1 32
I hereby accept the appointment as registered agent and agree	e to act in this capacity. I further agree to comply with

(If Changing Registered Agent, Signature of New Registered Agent)

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 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>	Type of Action
MGRM_	Monthur USA, Inc.	2655 LeJeune Road, Suite 50 Coral Gables, FL 33134	
			Add Remove
		-	Add Remove
			Add Remove
			Add Remove
			AddRemove
D. If amend	ding any other informati	on, enter change(s) here: (Attach additional sheet	ts, if necessary.)
			
			08 SEP
Dated Septe		ture of a manufactor authorized representative of a mer	SSECTION OF THE PROPERTY OF TH
	_	Faicon Managing Member Typed or printed name of signee	mber : 32

Page 2 of 2

Filing Fee: \$25.00