## L08000113232

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EXAMINER



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10/27/10--01018--014 \*\*25.00

10 OCT 27 PH 12: 22
SECRETARY OF STATE
ALLAHASSEF, FLORICA

## **COVER LETTER**

Division of Corporations						
SUBJECT: BTI Land, 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:						
Bague L Peneda						
BTI Land, LCC.						
201 Albandra Circle Suite 601						
Coral GAbles, fl 33/34						
City/State and Zip Code  **Dereda ebtidevelopers. 604  Email address: (to be used for future annual report notification)						
For further information concerning this matter, please call:    Concerning this matter, please call:   Concerning this matter, please c						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, 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

(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 Florida document number <u>L08000 // 3032</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (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 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 City

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 = Managing Member

<u>Title</u>	<u>Name</u>	•	Address	Type of Action
MGR.	Danne	TRUTHANK	201 Albandra Circle + 601 Graf Gabler & 33/34	Add Remove
MGR	Paul	Abbottsu	201 Alhambra Cucle Litt (06 Gaples, A 33/34	Add Remove
	·	· · · · · · · · · · · · · · · · · · ·		Add Remove
	<u>.</u>			Add Remove
				Add Remove 
				Add Remove
D. If amend	ding any other in	oformation, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
				_
		_		_
Dated	1/2	Sign ture Ma member	or authorized representative of a member	
		Typed	or printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00