## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KIRK PINKERTON, A PROFESSIONAL ASSOCIATION

Account Number : 071670002600 Phone

: (941)364-2481

Fax Number

: (941)364-2490

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Addres
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COLONY LENDER, LLC

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Electronic Filing Menu

Corporate Filing Menu

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Registration Section

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## **COVER LETTER**

Division of Co	orporations					
CHOIFCY.	COLON	Y LENDER LLC				
SUBJECT:		ted Liability Company	<del></del> _			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	oondence concerning this matter	to the following:				
	DA	DAVID M. SILBERSTEIN				
	Name of Person					
	KIRK PINKERTON					
	Firm/Company					
		P.O. BOX 3798				
		Address				
	SARASOTA, FLORIDA 34230					
	City/State and Zip Code					
	JSOUDERS@KIRKPINKERTON.COM  E-mail address: (to be used for fitture annual report notification)					
For further information	concerning this matter, please of		non			
JESS	SICA SOUDERS	at ( 941 ) 3	64-2481			
Name of Person		Area Code & Daytime 7	Telephone Number			
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fce & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fce, Certificate of Status & Certified Copy (additional copy is enclosed)			
	LING ADDRESS:	STREET/COURIE	R ADDRESS:			

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

10 FEB 16 AM 8: 31

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	NY LENDER LLC	
(Name of the Limited Liabilit (A Florida	y Company as it now appear. Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability ( Florida document numberL10000013832	Company were filed on <u>F</u>	EBRUARY 5, 2010 and assigned
This amendment is submitted to amend the following:		
A. If amending name, gpter the new name of the lim	nited liability company he	<u>re</u> :
The new name must be distinguishable and end with the wo	ords "Limited Liability Compa	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or registered agent and/or the new registered office add	ntered office address on o lress here:	our records, enter the name of the new
Name of New Registered Agent:	···	
New Registered Office Address:	F	ter Florida street address
	£-n	
<del></del>	City	, Florida 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

MGR = Manager

MGRM = Managing Member Type of Action Title Name Address MGR ARENDEE LLC 6835 GULF OF MEXICO DRIVE DbA 🕥 LONGBOAT KEY, FLORIDA 34228 Remove  $\prod Add$ Remove ☐ ∧dd Remove Add Remove □ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **FEBRUARY 15** 2010 Dated Signature of a member or authorized representative of a member DAVID M. SIEGAL

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00