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SECRETARY OF STATE

D. BRUGE
MAR 0 1 2010
EXAMINER

COVER LETTER

	itration Section ion of Corporations	•	
SUBJECT: _			
_	Name of Lin	nited Liability Company	
The enclosed A	Articles of Amendment and fee(s) are su	abmitted for filling.	
Please return a	Il correspondence concerning this matte	er to the following:	
		DAVID E. SWIRNOW	
		Name of Person	
SWIRNOW BUILDING SYSTEMS Firm/Company 2801 SISSON STREET			
		Firm/Company	
		801 SISSON STREET	
		Address	F (2)
	BAL	TIMORE, MD 21211-2902	O FEI
City/State and Zip Code			FEB 26 LAHASSE
	DSWI E-mail address:	RNOW@SWIRNOW.COM (to be used for future annual report notification)	NY OF B
For further info	ormation concerning this matter, please	•	D F STATE FLORID
	DAVID SWIRNOW	at (410) 338-1122 EXT 241	Dir. W
- 1.1 0.2	Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a cl	heck for the following amount:		
☑ \$25.00 Filir	ng Fee \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DBR&R AT	Γ 53 LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)		
The Articles of Organization for this Limited Liability Company v. Florida document numberL10000019101		and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
BDR&R AT	53 LLC		
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LL	F	
Enter new principal offices address, if applicable:		HA B	
(Principal office address MUST BE A STREET ADDRESS)		26 \\R\\ \$SE	
Enter new mailing address, if applicable:		20 CS	
(Mailing address MAY BE A POST OFFICE BOX)			
B. It amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ice address on our records, <u>enter the</u>	name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street addre.	ss	
	. Florida		
	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 = Manager MGRM = Managing Member **Title** Name Address Type of Action .□ Add □ Remove ☐ Add Remove ☐ Add Remove ∏ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member JERALD C CANTOR, TRUSTEE

Typed or printed name of signee

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