

L11000028998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

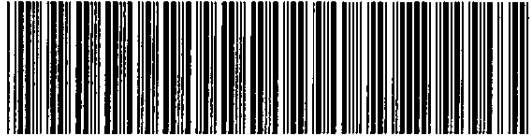
(Document Number)

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G. MCLEOD  
APR 25 2011  
EXAMINER



700202002867

04/21/11--01032--017 \*\*55.00

FILED  
11 APR 21 PM 3:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

James D. Palermo  
General Counsel and Executive Vice President



April 19, 2011

**VIA FEDERAL EXPRESS**

Florida Department of State  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: DK Webster, LLC  
L11000028998

Gentlemen:

Enclosed please find, for filing with your office, an original and copy of an Amendment to the Articles of Organization of DK Webster, LLC. The Amendment changes the name of the company to DK Jacksonville North, LLC.

I am also enclosing a check, in the amount of \$55.00, in payment for the required filing fee and for the return to my attention of a certified copy of the Amendment

Very truly yours,

JAMES D. PALERMO

JDP/ms  
Enclosures

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: DK Webster, 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:

**James D. Palermo**  
Name of Person

**DeBartolo Holdings, LLC**  
Firm/Company

**15436 North Florida Avenue, Suite 200**  
Address

**Tampa, FL 33613**  
City/State and Zip Code

**jpalermo@debartoloholdings.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**James D. Palermo** at ( **813** ) **908-8400**  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for 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)

**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**

DK Webster, 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 Liability Company were filed on March 9, 2011 and assigned Florida document number L11000028998.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

DK Jacksonville North, LLC

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)**

FILED  
11 APR 21 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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*

\_\_\_\_\_, 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_

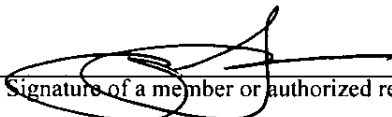
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated April 19, 2011

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
James D. Palermo  
\_\_\_\_\_  
Typed or printed name of signee