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B. BOSTICK

JUN - 7 2011

EXAMINER

COYER LETTER

7619 INDIAN LAKES LLC SUBJECT: 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: Larry W. Tew Jr Name of Person Firm/Company 55132 Bear Run Rd Address Callahan, FL 32011 City/State and Zip Code indianlakesdrive@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Larry W. Tew Jr Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$30.00 Filing Fee & **▼** \$25.00 Filing Fee \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

	(619 INDIAN	LAKES LLC		
(Name of the Limite	A Florida Limited	ny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Florida document numberL1100006		y were filed on	5/31/2011	and assigned
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liab	oility company here:		
	7627 INDIAN	LAKES LLC		
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Company	y," the designation	"LLC" or the abbreviation
Enter new principal offices address, if appl	icable:	Not Applicable		
(Principal office address MUST BE A STRE	ET ADDRESS)	 		······································
		·····		<u> </u>
				A T
Enter new mailing address, if applicable:		Not Applicable	****	1 1
(Mailing address MAY BE A POST OFFICE BOX)			· · · · · · · · · · · · · · · · · · ·	TI T
B. If amending the registered agent and registered agent and/or the new registered of			r records, <u>ente</u>	
Name of New Registered Agent:	Not Applica	ble		
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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = M	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Remove
			Add Remove
			Add Remove
- 			AddRemove
D. If amen	ding any other information, en	ter change(s) here: (Attach additional	
			SLUNL TO SEE
Dated	June 3	, <u>2011</u> .	AHII: 10 E.F.LORIDA
	Signature of	a member or authorized representative of a	a member
		Larry W. Tew Jr Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00