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SECRETARY OF STANDELAHASSEE.FLO

COVER LETTER

10:	Division of Co			
SUBJE	СТ•	Peach Pro	perty Buyers, LLC	
SUBJE	C1		ited Liability Company	
The enc	losed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please n	eturn all corresp	ondence concerning this matte	r to the following:	
		Lindsey Taylor		
Name of Person				
			Firm/Company	
			3395 Vanderbilt Dr	
		,	Wellington, FL 33414	
		* #**	City/State and Zip Code	
		lind: E-mail address: (sey.taylor@comcast.net to be used for future annual report notificat	ion
For furth	ner information o	concerning this matter, please of	·	
· <u>·</u> ···		ndsey Taylor		80-2335
	Name o	of Person	Area Code & Daytime To	elephone Number
Enclosed	l is a check for t	the following amount:		
√]\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional seps) is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations			STREET/COURIER	'''
		on of Corporations	Registration Section Division of Corporation	ons From
		ox 6327 assee, FL 32314	Clifton Building 2661 Executive Cente Tallahassee, FL 32301	r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Peach Proper	rty Buyers, LL	<u> </u>		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	p <mark>any as it now appea</mark> I Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Comparing L11000071600	ny were filed on	June 16, 2011	and assig	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	ability company her	<u>re</u> :		
Lindsey Mered	lith Taylor, LLC			
The new name must be distinguishable and end with the words "Lit.L.C."	mited Liability Comp	any," the designation "l	LLC" or the ab	breviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)			7. 2	
				413mg: 1_
			AFE TV	WANTED TO SE
Enter new mailing address, if applicable:			ARY SSE	-
Mailing address MAY BE A POST OFFICE BOX)			Y OF STATE	111
			HE HE	The same
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he	office address on (ere:	our records, <u>enter (</u>	the name of	the new
Name of New Registered Agent:				
New Registered Office Address:				
	En	ter Florida street add	lress	
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	S
			- -
			-
Dated	, , , , , , , , , , , , , , , , , , , ,		
		or printed name of signee	

Page 2 of 2

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