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Office Use Only



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J. SAULSBERRY EXAMINER

MAY 24 2012

COVER LETTER

TO: Registration Division of C						
SUBJECT:	G & A Griffin Inve	G & A Griffin Investment Properties, LLC				
	' ·					
	of Amendment and fee(s) are sui	_				
	Doni	na M. Flammang, Esq	uire			
Name of Person						
	Brenna	Brennan, Manna & Diamond, P.L.				
	· · · ·	Firm/Company				
	3301 Bo	3301 Bonita Beach Road, Suite 100			2012 HAY 2	
		Address				
	Bc	Bonita Springs, FL 34134				
	dua	City/State and Zip Code				1
	E-mail address: (dmflammang@bmdpl.com E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please	call:		OF STATE E.FLORIDA	02	
Don	na M. Flammang	at (_239_)	992-6578			
Name of Person			Daytime Telephone Num	ber		
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				osed)
MAILING ADDRESS:		STREET/COURIER 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G&A Grif (Name of the Limited (A	fin Investme Liability Compa Florida Limited I	ent Properties, LLC ny as it now appears on our Liability Company)	records.)			
The Articles of Organization for this Limited Lia Florida document numberL11000079		were filed on July 1	11, 2011	and assi	gned	
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liab	ility company here:				
Versteck Island, LLC						
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Company," the c	lesignation "L	LC" or the a	bbreviation	
Enter new principal offices address, if applica	8540 Dayton Avenue) Ā	2 6 13	·····		
(Principal office address MUST BE A STREE)	Fort Myers, FL 3390)7 <u>}</u>	THAY 2	71		
		·····			\$2.00 SARVES	
			آ. پر	7 CO	(1)	
Enter new mailing address, if applicable:			- CO ===	· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE I			9. A. 9.			
manning damess mill be fill of 1110e e	<u>, 0777</u>	-		20 70	 	
B. If amending the registered agent and/o registered agent and/or the new registered off			rds, <u>enter t</u>	the name of	f the new	
	D M 5					
Name of New Registered Agent:	Donna M. Flammang, Esquire					
New Registered Office Address:	3301 Bonita	Beach Road, Suite 10				
		Enter Florida street address				
	Bo		, Florida	34134	34	
				Zip Code	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

ľ

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> **Address Type of Action** MGR Lynn Domenici 8540 Dayton Avenue ✓ Add ☐ Remove Fort Myers, FL 33907 Gerald F. Griffin, II MGRM 525 Via Veneto ☐ Add Naples FL 34108 ✓ Remove MGRM Alexandra P. Griffin 525 Via Veneto ☐ Add Naples, FL 34108 Remove J. S. Crawford MGR 3755 Liberty Square ∏Add Fort Myers, FL 33908 Remove \square Add Remove \square 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

DUNA WETAMANG, AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00