## L12000051247

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12 MAY 29 PH 2: 40

C. LEWIS

MAY 3 0 2012

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations	***	Mike	magnetic states that the states of the state	4	**	
-	Lambre	se Bool E	stata II	^		•	e <sup>2</sup> eq
SUBJ		os Real E Limited Liabili				_	
The en	nclosed Articles of Amendment and fee(s) are	submitted for	r filing.				
Please	return all correspondence concerning this m	atter to the foll	lowing:				
		George	e Lambros	s III			
			ne of Person	-		_	
		Fin	n/Company				
		POI	Box 3018			_	
	<del>-</del>	,	Address			_	
			, FL 3499			_	
			te and Zip Coo				
	E-mail addre	GLambro ess: (to be used f	for future annu	com  nal report notifica	tion)	_	
For fu	rther information concerning this matter, plea	ase call:					
	George Lambros III	at	772)		81-9300	<del>,</del>	
	ivanie of Person		Area C	ode & Daytime T	elephone Num	ber	
Enclos	sed is a check for the following amount:						
\$2:	5.00 Filing Fee \$\times \text{Certificate of State}\$	ıs 🗀 Ce	.00 Filing Fe ertified Copy dditional cop		Certif Certif	Filing Fee, icate of Sta ied Copy ional copy	

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

FILED 12 MAY 29 PM 2: 40

(Name of the Limited I	Mbros Real lability Compar lorida Limited L	Estate, LLC y as it now appears (ability Company)	SECI TALL, on our records.)	START OF STATE SHASSEE, FLORIDA	
The Articles of Organization for this Limited Lial Florida document number L120000512		were filed on	April 13,2012	and assigned	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	<u>he limited liabi</u>	lity company here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ed Liability Company	," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		4440 PGA Bou	levard		
(Principal office address MUST BE A STREET	ADDRESS)	Suite 600			
		Palm Beach G	ardens, FL 3341	0	
Enter new mailing address, if applicable:		PO Box 3018			
(Mailing address MAY BE A POST OFFICE BOX)		Stuart, FL			
		34995			
B. If amending the registered agent and/or registered agent and/or the new registered offi	registered off ce address hero	ice address on ou	r records, <u>enter tl</u>	he name of the new	
Name of New Registered Agent:	George Lam	ambros III			
New Registered Office Address:	New Registered Office Address: 2950 SE Ocean Boulevard Bldg 126 Apt #1				
		Enter Florida street address			
		Stuart	, Florida	34996	
		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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Aanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			□ Domovo
			Add Remove
			Add Remove
			AddRemove
			Add Remove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necess	sary.) 
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— —			FIL 12 MAY 29 SECOLULARI MILLAUS ASSE
Dated	Signature of a memb	2 er or authorized representative of a member	FILED Y 29 PM 2: 1 JARY OF STA ASSEE, FLOR
		d or printed name of signee	2: 40 ORIDA

Page 2 of 2

Filing Fee: \$25.00