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PICK-UP	☐ WAIT	MAIL.
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ALLAHAPATE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

Donovan Ponderosa, 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:

Matthew C. Bothwell, Esq.

Name of Person

Matthew C. Bothwell, P.A.

Firm/Company

310 Third St.

Address

Neptune Beach, FL 32266

City/State and Zip Code

kvle@donovanac.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew C. Bothwell

at (904) 351-6640

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

Donovan Ponder		
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liab	is it now appears on our records.) ility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number L12000150874.	re filed on December 3, 2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	y company here:	
Southside Ponderosa, LLC		
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company," the designation "LLC"	' or the abbreviation
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, enter the	name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Cip C pd e
New Registered Agent's Signature, if changing Registered Agent:)	2 330 2 330 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office adcompany has been notified in writing of this change.	e performance of my duties, and I am f wided for in Chapter 608, F.S. Or, if th	ami lie ar with and its abcument is d liability

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	William J. Donovan, Sr.	726 Ponte Vedra Blvd.	Add
		Ponte Vedra Beach, FL 32082	Remove
MGRM	Linda Donovan	726 Ponte Vedra Blvd.	Add
		Ponte Vedra Beach, FL 32082	Remove
MGRM	Donovan Estates, LLC	315 6th Ave. S.	
		Jacksonville Beach, FL 32250	Remove
			. Add
			Remove
			. Add
			Remove
			. Add
			Remove

*	ntion, enter change(s) here: (Attach additional sheets, if r	recessur y.
		
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December	2012	
Sig	produce of a member or authorized representative of a member ovan, Sr. William J. Mood	

Page 3 of 3

Filing Fee: \$25.00