

L13000065541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

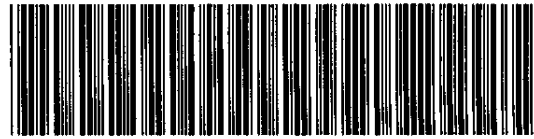
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2013 OCT -4 AM 10:57
STATE OF MICHIGAN
TOLSON

J. SAULSBERRY
EXAMINER
OCT 9 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 357 SW 27th TER 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:

Cathy R Lederer
Name of Person

357 SW 27th TER LLC
Firm/Company

6640 La Pina Ct
Address

Boca Raton FL 33433
City/State and Zip Code

Cathy Lederer1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cathy Lederer at (617) 413-5466
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

2013 OCT -4 AM 10:57
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

357 SW 27th TER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 3, 2013 and assigned
Florida document number L13000065541.

2013 OCT -4 AM 10:57
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH
FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6640 La Pina Ct
BOCA RATON FL 33433

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6640 La Pina Ct
BOCA RATON FL 33433

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

6640 La Pina Ct
Enter Florida street address
BOCA RATON, Florida 33433
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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

This is a CHANGE of Address

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	CATHY R LEDERER	22861 MARBELLA CIR	<input type="checkbox"/> Add
		Boca Raton FL 33433	<input checked="" type="checkbox"/> Remove
MGRM	CATHY R LEDERER	6640 La Pina Ct	<input checked="" type="checkbox"/> Add
		BOCA RATON FL 33433	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 11:11 AM
 OCT 15 11:11 AM
 STATE

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated Oct 1, 2013.

Cathy R Lederer

Signature of a member or authorized representative of a member

CATHY R LEDERER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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FALL RIVER
REGISTRATION
TALL RIVER