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Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To;

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

0CT 28

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STRAND LAKE SHADOWS, LLC.

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B. BOSTICK

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Help OCT 2 9 2013

EXAMINER

COVER LETTER

TO:	Registratio Division of	n Section Corporations	
SUBJE		TAND LAKE SHADOWS, LLC.	
SUBJE		Name of Limited Liability Company	
The enc	losed Article	es of Amendment and fee(s) are submitted for filing.	
Please n	eturn all com	respondence concerning this matter to the following:	
		SAM E. THOMAS	
		Name of Person	
		SAM E. THOMAS & ASSOCIATES	
		Firm/Company	
		3715 NORTHSIDE PKWY NW, BLDG 400, STE 650	
		Address	
		ATLANTA, GEORGIA 30327	- 12
		City/State and Zip Code	
		sthomas\$20@aol.com	2013 OCT
		E-mail address: (to be used for future annual report notification)	OCT 28
For fun	ther informat	tion concerning this matter, please call:	SS - 00
SAM I	E. THOMAS	404 350-8337 at ()	
	N	ame of Person Area Code & Daytime Telephone Number	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Enclose	ed is a check	for the following amount:	
図 \$25	.00 Filing Fe	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	of Status &

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, PL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	STRAND LAKE S	•				
(Name of the Limited	Liability Compar Florida Limited L	<u>iv as it naw and</u> iability Compan	ears on our records.) y)			
The Articles of Organization for this Limited L	iability Company	were filed on _	September 26, 2013	and as	signed	
Florida document numberL13000136349						
				3 ° 5	2013	
This amendment is submitted to amend the foll	owing:				300	τ.
A. If amending name, enter the new name o	f the limited liab	lity company	h <u>ere:</u>	72a-	<i>∠</i> ′	
STRAND LAKE SHADOW, L.L.C.				Šý z M÷s	ထိ	
The new name must be distinguishable and end wi	th the woods #1 imi	and Liebility Co.	mnany " the decimation '	F # 1	abhringiat	ion
"L.L.C."	at the words is into	CG Liability Car	infrary, the designation	— : .		
		271 S N/OPTI	HSIDE PKWY NW	Ördli Ördli	ထု	
Enter new principal offices address, if applie				===	- & -	-
(Principal office address MUST BE A STREE	TADDRESS)	BLDG 400, STE 650				_
		ATLANTA,	GEORGIA 30327			_
Enter new mailing address, if applicable:		3715 NORTI	HSIDE PKWY NW			
(Mailing address MAY BE A POST OFFICE BOX)		BLDG 400,	STE 650	-		_
Muning duaress MAT DEAT OST OFFICE	10/1	ATLANTA.	GEORGIA 30327			_
						-
B. If amending the registered agent and registered agent and/or the new registered of			on our records, <u>enter</u>	the vame	of the r	1 C W
Name of New Registered Agent:	N/A					
New Registered Office Address:	N/A					
140 AT TOOLINGSHIM SCHILLS VANITABLE			Enter Florida street a	ddress		_
			, Florida			
		City		Zip Co	de	_
No	Desistance Acces					

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

Page 1 of 3

MGR = Manager

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:

MGKM =	Managing Member		
<u>Title</u>	Name	Address	Type of Action
MGR	STRAND FINANCIAL, INC.	P.O. BOX 496029	Add
		GARLAND, TEXAS 75069	Remove
MGR	STRAND FINANCIAL, INC.	P.O. BOX 496029	
		GARLAND, TEXAS 75049	Remove 0C
			28 Add
			Add
			Add
			Add Remove

	ending any other information, o	enter change(s) here: (Attach additional sheets, if necessary.)
ted	OCTOBER 16	2013
_		fan Du
		e-off member or authorized representative of a member iDERS, SECRETARY OF STRAND FINANCIAL, INC., MANAGER
		Typed or printed mame of signee

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Filing Fee: \$25.00

2013 OCT 28 AH 9: 49