

L14000062962

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

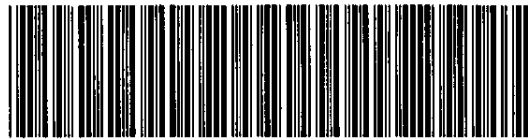
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 26 2014

T. BROWN

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Three Palms Developers XII, 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:

Michael D. Gentzle, Esq.
Name of Person
Coleman, Yovanovich & Koester, P.A.
Firm/Company
4001 Tamiami Trail North, Suite 300
Address
Naples, FL 34103
City/State and Zip Code
capmona@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael D. Gentzle, Esq. at **(239) 435-3535**
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



**COLEMAN
YOVANOVICH
KOESTER**

COUNSELORS AND ATTORNEYS AT LAW

Kevin G. Coleman | Richard D. Yovanovich | Edmond E. Koester
William M. Burke | Gregory L. Urbancic | Matthew L. Grabinski | Craig D. Grider
Matthew M. Jackson | Jeffrey J. Beihoff | Harold J. Webre | Caroline M. Magliolo
Charles A. B. Thomson | David Kerem | Michael D. Gentzle | Of counsel: Kenneth R. Johnson

Writer's Email:
mgentzle@cyklawfirm.com

June 23, 2014

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

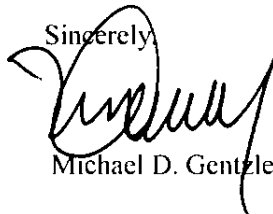
RE: Three Palms Developers XII, LLC
Document Number: L14000062962

Dear Sir or Madam:

Enclosed please find a check in the amount of \$25.00, which represents the filing fee for the Articles of Amendment to Articles of Organization.

If you have any questions or need additional information, please do not hesitate to contact us at 239-435-3535.

Sincerely,



Michael D. Gentzle

/mle

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
14 JUN 25 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Three Palms Developers XII, 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 April 16, 2014 and assigned
Florida document number L14000062962.

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:

1527 Galleon Drive

(Principal office address MUST BE A STREET ADDRESS)

Naples, FL 34102

Enter new mailing address, if applicable:

1527 Galleon Drive

(Mailing address MAY BE A POST OFFICE BOX)

Naples, FL 34102

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:

Vincent P. Mona

New Registered Office Address:

1527 Galleon Drive

Enter Florida street address

Naples

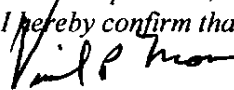
City

, Florida 34102

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<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

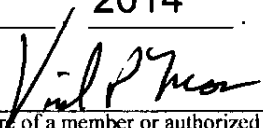
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 19 2014



Signature of a member or authorized representative of a member

Vincent P. Mona, Manager

Typed or printed name of signee