L02000025598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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JUL 17 2015

T CANNON

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2015

VICKIE CARCAISE
RESIDENTIAL PROPERTIES OF WESTON LLC
P.O. BOX 19119
PLANTATION, FL 33317 US

SUBJECT: RESIDENTIAL PROPERTIES OF WESTON LLC
Ref. Number: L02000025598

We have received your document for RESIDENTIAL PROPERTIES OF WESTON LLC and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Cannon
Regulatory Specialist II

Letter Number: 015A00010609

K&L GATES

K&L GATES LLP
SOUTHEAST FINANCIAL CENTER
200 SOUTH BISCAYNE BLVD., SUITE 3900
MIAMI, FL 33131-2399
T 305.539.3300 F 305.358.7095 klgates.com

Clayton E. Parker
D 305.539.3306
clayton.parker@klgates.com

July 15, 2015

VIA FEDERAL EXPRESS

Tina D. Cannon, Regulatory Specialist II
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: **Letter No. 015A00010609 - Residential Properties of Weston LLC**

Dear Ms. Cannon:

Pursuant to your request enclosed please find a completed Articles of Amendment to Articles of Organization form in connection with the above referenced entity including a copy of your letter.

Should you need additional information, please do not hesitate to contact me.

Sincerely,

Clayton E. Parker

Enclosure

CEP/bsc

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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RESIDENTIAL PROPERTIES OF WESTON 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 09/30/2002 and assigned Florida document number L02000025598.

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 contain 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)

3163 INVERNESS DRIVE
WESTON, FL 33332

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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: CLAYTON E. PARKER

New Registered Office Address: K&L GATES LLP, 200 SOUTH BISCAYNE BLVD., SUITE 3900
Enter Florida street address

MIAMI, **Florida** 33131-2370
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 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.

CEParker

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change

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

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated JULY 1, 2015

Signature of a member or authorized representative of a member

Joseph G. Caporella

Typed or printed name of signee

Filing Fee: $25.00