Fale COOC Requester's Name	000	11024
Stol East frentice Ave. Address (1) City/State/Zip Phone #	Ste. 605	4000045939846 09/17/0101091005 ******25.00 *****25.00
		fice Use Only
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):		
5014 0142220444		
I.	(Document #)	
(Corporation Name)	<u> </u>	
2(Corporation Name)	(Document #)	<u> </u>
3(Corporation Name)	(Document #)	
4(Corporation Name)	(Document #)	F OI SEP SEORETA ALLIAHA
☐ Walk in ☐ Pick up time	_	Certified Cop
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status P
NEW FILINGS	<u>AMENDMENTS</u>	ADA O
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A Change of Register Dissolution/Withdr Merger	ed Agent awal
OTHER FILINGS	REGISTRATION/QU	ALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnershi Reinstatement Trademark Other	
		Examiner's Initials



Norma T. Barrios CT Corporation 1675 Broadway, Suite 1200 Denver, CO 80202

Susan Gail Price as Trustee of the Susan Gail Price Trust, dated

June 12, 2000/Mount Belford Development, LLC

Dear Norma:

Re:

In connection with the transfer of ownership of Mount Belford Development, LLC to Susan Gail Price as Trustee of the Susan Gail Price Trust, dated June 12, 2000, enclosed please find a document accomplishing the transfer of ownership.

Please sign the document as Registered Agent, where indicated and forward it in the enclosed Federal Express envelop to:

> Secretary of State Division of Corporations Florida Department of State The Capitol - 409 East Gaines Street Tallahassee, FL 32399

This MUST be received and filed with the Secretary of State prior to September 15, 2001, as your 180-day deadline for your 1031 Exchange completion is September 15, 2001.

We have enclosed a check in the amount of \$195.00 made payable to CT Corporation for fee as Registered Agent; and a check in the amount of \$25.00 made payable to "Florida Honolulu Secretary of State" for the filing fee.

Please call with any questions.

Sincerely,

Fave Gree

Reverse Department Manager

Enclosures

Corporate Office

8101 East Prentice Avenue, Suite 605 Greenwood Village, Colorado 80111 303-773-6888 FAX 303-796-7848

888-774-1031 www.1031pros.com

735 Bishop Street, Suite 416 Honolulu, Hawaii 96813 808-951-1031 FAX 808-947-1031

Ç:

Naples

5100 Tamiami Trail North, Suite 105 Naples, Florida 34103 941-430-6008 FAX 941-540-0063

Northeast

1177 High Ridge Road Stamford, Connecticut 06905 203-321-1231 FAX 203-595-9468



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF MOUNT BELFORD DEVELOPMENT, LLC

(A Florida Limited Liability Company)

FIRST: The date of filing of the articles of organization was September 13, 2000, document number L00000011024.

SECOND: The following amendment(s) to the articles of organization were adopted by the Limited Liability Company:

The mailing address and street address of the principal office of the Limited Liability Company is amended to:

c/o Susan Gail Price as Trustee of the Susan Gail Price Trust, dated June 12, 2000 910 Craig Drive Henderson, KY 42420

The name and the Florida street address of the registered agent is amended to:

1200 South PINE Island Road Plantation, FL 33334 40 CT Corporation System

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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.

By: Hiedi M. Liesch., Registered Agent

This Limited Liability Company is a single member Limited Liability Company. Ownership of the Limited Liability Company is transferred to, and the sole member of the Limited Liability Company is changed to:

Susan Gail Price as Trustee of the Susan Gail Price Trust, dated June 12, 2000

Dated September 12, 2001.

ignature of a member or authorized representative of a member

Gary R Gorman, Manager
Typed er printed name of signer

Filing Fee: \$25.00