## L000015123

(Requestor's Name)					
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(Document Number)					
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S. HAWKES NOV 172008 EXAMINER

## **COVER LETTER**

Division of Co	rporations					
SUBJECT: R.E.I.N	I. APARTMENT, L.C	2	_			
SebJECT.		ited Liability Company)				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	Frederic Stanley, Jr., Es	quire				
		(Name of Person)				
	Frederic Stanley, Jr., P.L.					
		(Firm/Company)				
260 Maitland Avenue, Suite 1500						
		(Address)				
	Altamonte Springs, FL 3	2701				
		(City/State and Zip Code)				
For further information	concerning this matter, please c	all:				
Frederic Stanley, Jr., Esquire		at ( 407 ) 682-6200 ext. 205				
(Name of Person)		(Area Code & Daytime Telephone Number)				
Enclosed is a check for t	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)			

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TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R.E.I.M. APARTMENT, L.C.					
( <u>Name of the Limited L</u> (A F	<u>iability Company</u> Iorida Limited Lial	as it now appears on our records. bility Company)			
The Articles of Organization for this Limited Lial Florida document number <u>L00000015123</u>	oility Company w	ere filed on December 7, 2000	and assigned		
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabilit	ty company here:			
R.E.I.M. APARTMENT, LLC			-d. 0		
The new name must be distinguishable and end with "L.L.C."	the words "Limited	I Liability Company," the designatio	n "[LC]" or the abbrewation		
Enter new principal offices address, if applical	ole:		- 1		
(Principal office address MUST BE A STREET	ADDRESS)				
	-		- T-		
Enter new mailing address, if applicable:	-				
(Mailing address MAY BE A POST OFFICE BO	<u>OX)</u>				
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	rederic Stanley	, Jr., Esquire	er the name of the new		
New Registered Office Address:	New Registered Office Address: 260 Maitland Avenue, Suite 1500 (Enter Florida street address)				
	Altamonte Spring				

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.

(City)

(II Changing Registered Agent, Signature of New Registered Agent)

(Zip Code)

Page 1 of 2

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:

MGR = Manager MGRM = Managing Member **Title** <u>Name</u> **Address Type of Action** ☐ Add ☐ Add Remove \_ Add ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated November 12 Signature of a member or authorized representative of a member Frederic Stanley, Jr. Typed or printed name of signee Page 2 of 2

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Filing Fee: \$25.00