## LD0000015124

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
. (Decument Number)				
(Document Number)				
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**EXAMINER** 

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## **COVER LETTER**

TO: Registration Sec Division of Corp	ction Forations					
SUBJECT: R.E.I.M. COMMUNITIES, L.C.						
(Name of Limited Liability Company)						
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspon	dence concerning this matter	to the following:				
	Frederic Stanley, Jr., Es	quire				
		(Name of Person)				
	Frederic Stanley, Jr., P.L					
		(Firm/Company)				
		(Address)				
(City/State and Zip Code)						
For further information co	ncerning this matter, please c	all:				
Frederic Stanley, Jr., Esquire		at ( 407 <sub>)</sub> 682-6200 ext. 20				
(Name of	(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the	e 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R.E.I.M. COMMUNITIES, L.C.				
(Name of the Limite	d Liability Company as it now A Florida Limited Liability Com	appears on our records.)	<del></del>	
The Articles of Organization for this Limited I Florida document number L00000015124	Liability Company were filed o	December 7, 2000	and assigne	ed
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability compa	ny here:		
R.E.I.M. COMMUNITIES, LLC				
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability	Company," the designation "L	LC" or the abbre	viatio
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:		<del></del>	<del></del>	
(Mailing address MAY BE A POST OFFICE	<u></u>		<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of	or registered office addres	s on our records, enter tl	he name of th	e nev
Name of New Registered Agent:	Frederic Stanley, Jr., Esqu	uire	<del>- 200 <b>8</b> - 200</del>	
New Registered Office Address:	260 Maitland Avenue, Sui	ite 1500	C 80	(
		uire ite 1500 (Enter Florida street add , Florida 327	ress)	! !
	Altamonte Springs	, Florida <u>32</u> 7	701	-
	(City)		(Zip Code)	$\ddot{\Box}$
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as register the provisions of all statutes relative to the p accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	proper and complete perform istered agent as provided for registered office address, <b>A</b>	nance of my duties, and I a in Chapter 608, F.S. Or, i	m familiar with if this documen	h and

Page 1 of 2

(If Changing Registered Agent Signature of New Registered Agent)

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 = Mai MGRM = M	nager 1anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
<del></del>			Add Remove
	·		Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necess	sary.)
			O8 NOV
Dated Nover			TI A TI A
	Frederic Stanley, Jr.	r or authorized representative of a member or printed name of signee	D STANGE TO STAN

Page 2 of 2

Filing Fee: \$25.00