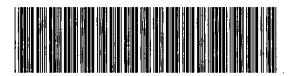
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SECRETARY OF STATE

T. CLINE

SEP 15 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: Island F	Properties, LLC			
		ited Liability Company)		
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	David B. Pfeil	, , , , , , , , , , , , , , , , , , ,	<u>.</u>	
		(Name of Person)		
	Island Properties, LL	.C		
		(Firm/Company)		
	6077 Clark Center A			
		(Address)		
	Sarasota, FL 34238	(City/State and Zip Code)		
		(City/State and Zip Code)		
For further information	concerning this matter, please of	eall:	SE S	C.C. L.T.MAN
David B. Pfeil		at (941_) 927-7700		
(Name	of Person)	(Area Code & Daytime T	Telephone Number))
Enclosed is a check for	the following amount:		E FLORIES	5
\$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 enc	

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 Island Properties, LLC

(<u>Name of the Limited Liab</u> (A Flori	oility Company as it now appears o ida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liabilit	ty Company were filed on Dece	mber 28, 2000 and assigned
Florida document number <u>L0100000030</u>	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	•
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,	"the designation "LLC" or the abbreviation
B. If amending the registered agent and/or re registered agent and/or the new registered office a	_	records, enter the name of the new
Name of New Registered Agent:	· 	
New Registered Office Address:		,
•	(Enter Florida street address), Florida (City) (Zip Code)	
	(City)	(Zip Code)

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

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.

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 **Type of Action** <u>Name</u> **Address** MGRM David B. Pfeil 6077 Clark Center Avenue **✓** Add Remove Sarasota, FL 34238 William Moore MGRM 766 S. Osprey Avenue Sarasota, FL 34236 Add **√** Remove Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated March 19, Figuardre of a member or authorized representative of a member David B. Pfeil Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00