## DIO0000352

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**EXAMINER** 



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## **COVER LETTER**

TO: Registration  Division of 0		·		
SUBJECT:	GOTHAM LAND PARTNERS III, LLC			
		ited Liability Company	<del></del>	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corre	spondence concerning this matte	r to the following:		
	M	MOHAMMAD T. ISMAIL		
		Name of Person		
	GOTHA	GOTHAM LAND PARTNERS III, LLC		
		Firm/Company		
	167	16701 S. W. 63RD MANOR		
	-	Address		
	SOUTH	WEST RANCHES, FL	33331	
		City/State and Zip Code		
		IIR3000@YAHOO.CO		
For further information	n concerning this matter, please	to be used for future annual repor call:	notification)	
MOHAMMAD T. ISMAIL		at ( 305 )	331-3376	
Nan	e of Person		aytime Telephone Number	
Enclosed is a check fo	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	S60.00 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

## GOTHAM LAND PARTNERS III, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) 04/06/2001 The Articles of Organization for this Limited Liability Company were filed on and assigned L01000005352 Florida document number \_\_\_\_\_ 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 end with 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) 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: New Registered Office Address: Enter Florida street address Florida City

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.

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 <u>Title</u> <u>Name</u> **Address** Type of Action MGR JAMILA TAHIR 16701 S. W. 63rd MANOR ✓ Add SOUTHWEST RANCHES, FL 33331 Remove ☐ Add ☐ Remove ☐ Add Remove ☐ Add Remove Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 31 2011 Dated \_\_\_ Signature of a member or authorized representative of a member MOHAMMAD T. ISMAIL Typed or printed name of signee

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Filing Fee: \$25.00