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COVER LETTER

	RR REALTY OSCEOLA NO. 8., LLC (Name of Limited Liability Company)	
The enclosed Article	es of Amendment and fee(s) are submitted for filing.	
lease return all cor	respondence concerning this matter to the following:	
	CLAUDE A. BRIGANTE	
	(Name of Person)	
	STARR REALTY OSCEOLA NO. 8., LLC	
	(Firm/Company)	
	P.O. BOX 359	
	(Address)	
	BOYNTON BEACH, FL 33425	

OB JUN 11 AM III: 28
SECRETARISE PROPERTY.

+

CLAUDE A. BRIGANTE

at (561) 330-9785

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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)

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

STARR REAL (Name of the Limited Lia (A Flo	LTY OSCEOLA NO. 8., LLC bility Company as it now appears on orida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liabil Florida document number <u>L01000015975</u>	lity Company were filed on <u>SEPT.</u>	17, 2001 and assigned	
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:	7.00	
The new name must be distinguishable and end with the "L.L.C." B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our i	THE SERVICE OF THE SE	
Name of New Registered Agent:			
New Registered Office Address:	(Enter Florida street address) , Florida		
_			
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi	istered 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 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 = Manager MGRM = Managing Member **Type of Action** <u>Title</u> Name 1 **Address** P.O BOX 359 **CLAUDE A. BRIGANTE** <u>MGRM</u> ☐ Add BOYNTON BEACH FL, 33425 Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Henry A. Ver Typed or printed name of signee

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Filing Fee: \$25.00