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SECRETARY OF STATE
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M. Company APR 2 1 2000

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Maish Harbor Development LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mallory loayle Holm, Esq. (Name of Person)
SL6 Management Services, LLC (Firm/Company)
4315 Pablo Daks Court, Suite
Jacksonville FL 32224 (City/State and Zip Code)
For further information concerning this matter, please call:
Mallory Coayle Holm at (904) 482-1144 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED

ARTICLES OF AMENDMENT TO

08 APR 18 PM 2: 20

ARTICLES OF ORGANIZATIONSECRETARY OF STATE TALLAHASSEE FLORIDA

(Name of the Limited	Harbor Development LLC Liability Company as it now appears on our records.	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)		
The Articles of Organization for this Limited Li	ability Company were filed on August 29, 200 Z and assigned	
Florida document number	000 22 494	
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company," the designation "LLC" or the abbreviation	
B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered office address on our records, enter the name of the new fice address here:	
Name of New Registered Agent:	SLLo Management Services, UC	
New Registered Office Address:	4315 Pablo Daks Court, Suite 1 (Enter Florida street address)	
	Jacksonville, Florida 32224 (City) (Zip Code)	
New Registered Agent's Signature, if changing B	tagistarad Agants	

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)

Kunkel

· 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 Title <u>Name</u> **Address** Type of Action Remove Add Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Kun Kel
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00