Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000054690 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: {850}222-1092

Fax Number

: (850)222-9428

LIMITED LIABILITY AMENDMENT

MC, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Flactionic Filing Wents

Public Access Hain

A STAN MAR - 7 2005

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M	IC, LLC	
	(Present Name) (A Florida Limited Liability Company)	
first:	The Aticles of Organization were filed on 12/06/2002 and assigned document number L02000032753	
SECOND	The following amendment(s) to the Articles of Organization was/were adopted by liability company:	the limited
i. The sole: manager/me	managing member will be Tarragon South Development Corp. and Richard D. Zipes is no longer a ember.	
2. The regis	tered agent will be:	ත -
1200 SOUT	DRATION SYSTEM TH PINE ISLAND ROAD TON FL 33324	FILEU 2005 MAR -4 AM 10: 08 PALLAHASSEE, FLORIDA TALLAHASSEE
Dated	March 3 2005	IONS IDA
	Euri D Pichero Signature of a Member or Authorized Representative of a Member	 .
	Erin D. Pickens Typed or Printed Name of Sixues	_
	- 4 F	

Filing Fee: \$25.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.501, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	2005 TAL
MC, LLC	EQ F
2. The name and the Florida street address of the registered agent and office are:	OF COR
C T Corporation System	ERPER C
(Name)	D; 08
1200 South Pine Island Road	A SE
Fibrida Street Address (P.O. Box MOT ACCEPTABLE)	. 3
Plantation FL 33324	
City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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, Florida Statutes.

C T Corporation System

FLAGT - GNOUGH C T System Online