

L03000004920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

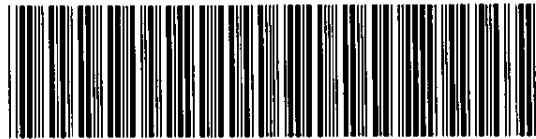
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

MAR 18 2013
B. KOHR



400245657604

03/15/13--01002--006 **25.00

RECEIVED
SECRETARY OF STATE
CORPORATIONS
2013 MAR 15 AM 3:50
TO ARCHIVAL USE
SUFFICIENCY OF FILING

FILED
2013 MAR 15 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

13 MAR 15 AM 10:53
TALLAHASSEE, FLORIDA

CONTACT: Kim Weidenbach

DATE: 03/14/13

REF. #: 000314.182653

CORP. NAME: CRYSTAL RIVER HOLDINGS, LLC

- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input checked="" type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 103973 FOR \$ 25.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CRYSTAL RIVER HOLDINGS, LLC

(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 Liability Company were filed on 02/10/2003 and assigned
Florida document number L03000004920.

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: NRAI SERVICES, INC.

New Registered Office Address: 1200 SOUTH PINE ISLAND ROAD
Enter Florida street address

PLANTATION, Florida 33324
City Zip Code

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.

Katie Wonsch
If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3 Katie Wonsch
Assistant Secretary

FILED
13 MAR 15 AM 10:53
CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA

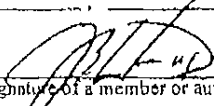
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Palm Valley Shores, Inc.	539 Canal Road	<input checked="" type="checkbox"/> Add
		Ponte Vedra, FL 32082	<input type="checkbox"/> Remove
MGRM	Crystal River Holdings, LLC	1030 A1A North	<input type="checkbox"/> Add
		Ponte Vedra Beach, FL 32082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated March 14, 2013


Signature of a member or authorized representative of a member

John B. Harris M.D., Authorized Representative of Member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00