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SECRETARY OF STATE

OF CORPORATION

COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: TERRA	BEACHSIDE VILL. (Name of Lim	AS, LLC nited Liability Company)	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	GARY L. BROWN, ESQ	(Name of Person)			
·					
EISINGER, BROWN, LEWIS & FRANKEL, P.A. (Firm/Company)					
	4000 HOLLYWOOOD B	LVD., # 265-S			
·		(Address)			
	HOLLYWOOD, FL 3302				
		(City/State and Zip Code)			
For further information co	oncerning this matter, please o	all:			
GARY BROWN		at (954) 894-8000			
(Name o	f Person)	at (954) 894-8000 (Area Code & Daytime T	elephone Number)		
Enclosed is a check for th	e 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)		
አ ብል ነገር ቦ	NG ADDRESS:	STREET/COLIRIER	ADDRESS:		

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TERRA BEACHSIDE VILLAS,			
(Name of the Limit	ed Liability Company as (A Florida Limited Liabili	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited	Liability Company were	filed on February 20, 2003	and assigned
Florida document number L03000006335	- <u></u> ·		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability of	ompany here:	
The new name must be distinguishable and end v "L.L.C."	vith the words "Limited Li	ability Company," the designation "I	LC" or the abbreviation
Enter new principal offices address, if appl	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		<u>∞ ×</u> s
			DE CR
Enter new mailing address, if applicable:			8 6 8 6
(Mailing address MAY BE A POST OFFICE	E BOX)		3 345
			?
			5 = m
B. If amending the registered agent and	l/or registered office a	ddress on our records, enter t	he name of the new
registered agent and/or the new registered			
Name of New Registered Agent:			
New Registered Office Address:	4000 Hollywood Bo	ulevard, Suite 265-S	
		(Enter Florida street ada	lress)
	Hollywood	, Florida <u>330</u>	021
	(Cit		(Zin 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.

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:

♦ e •

MGR = Mana MGRM = Mai	ger naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	

Dated August 7	·	2008	
	Signature of la r	nember of a member	
_	,	Typed or printed name of signee	And 444

Page 2 of 2

Filing Fee: \$25.00