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TARY OF STATE OF CORPORATIONS

## **COVER LETTER** TO: Registration Section **Division of Corporations** 1 BHARBOR 9A, LL (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: Eric Schummer (Name of Person) (Firm Company) **659 NANDINA DRIVE** (Address) WESTON, FL, 33327 (City/State and Zip Code) For further information concerning this matter, please call: **ERIC SCHUMMER** (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: \$55,00 Filing Fee & Certified Copy \$60.00 Filing Fee, Certificate of Status & \$25.00 Filing Fee \$30,00 Filing Fee & Certificate of Status

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1 BHARBOR 9A, LLC

(All	Liability Company as it now apper Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Lia Florida document number	bility Company were filed on	05/15/2003	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of t	the limited liability company h	ere:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany." the designation "	LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offi		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
Name of New Registered Agent:  New Registered Office Address:		,	
•		Enter Florida street ad	kiress)
•			
•	(City)		ldress) (Zıp Code)
	(City)		
New Registered Office Address:	(City)  egistered Agent;  agent and agree to act in this oper and complete performance ered agent as provided for in Cogistered office address, I herei	Florida Florida capacity. I further age of my duties, and I of thapter 608, F.S. Or,	(Zıp Code) gree to comply with am familiar with and if this document is

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> Name <u>Address</u> Type of Action 659 NANDINA DRIVE MGRM **EDGAR MARSHALL** X Add Remove WESTON, FL 33327 MGR **ERIC SCHUMMER** 659 NANDINA DRIVE ☐ Add WESTON, FL 33327 X Remove ∏Add Remove \_\_\_ Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ARTICLE III: THE PURPOSE FOR WHICH THIS LIMITED LIABILITYCOMPANY IS ORGANIZED IS: ANY AND ALL LAWFUL BUSINESS. INCLUDING BUY, SELL, MORTGAGE, AND HOLD REAL ESTATE. Dated January 15th 2008 Signature of a member or authorized representative of a member Eric schummer Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00