# L03000028915

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TALLAHASSEE, FLORIDA

J. BRYAN

SEP 2 0 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration of Division of	on Section f Corporations			
SUBJECT:	903 MILL	S MARKET, LLC		
	Name of Lim	ited Liability Company	·	
			ES S	
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.		
Please return all corr	respondence concerning this matte	r to the following:	SE IT MIN 21	
	RICK SITZER			
		Name of Person		
	90:	3 MILLS MARKET, LLC		
		Firm/Company	·	
		Address		
		ORLANDO FL 32839		
		City/State and Zip Code		
	E-mail address: (	to be used for future annual report noti	fication)	
For further informati	ion concerning this matter, please o	call:		
	RICK SITZER	at ( 386 )	789-1316	
Name of Person Area Code & Daytime Telephone N		ne Telephone Number		
Enclosed is a check t	for the following amount:			
<b>✓</b> \$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)	

#### 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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TALLAHASSEE, FLORIDA

# 903 MILLS MARKET, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

			P	
The Articles of Organization for this Limited Liabil	· · · —	JULY 28, 2003	and assigned	
Florida document number L0300002891	5			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	limited liability company he	ere:		
The new name must be distinguishable and end with the	e words "Limited Liability Com	pany " the designation "I I	C" or the abbreviation	
"L.L.C."	words Elimica Elability Colli	Jany, the designation ED	C of the appreviation	
Enter new principal offices address, if applicable	··			
(Principal office address MUST BE A STREET A	DDRESS)			
	<del></del>			
Pater and the second se				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	<u></u>			
B. If amending the registered agent and/or r		our records, enter the	name of the new	
registered agent and/or the new registered office	address here:	•		
N 01 D 1 1				
Name of New Registered Agent:				
New Registered Office Address:	r.	utau Elavida atu at aldu-		
	Enter Florida street address			
<del>-</del>	City	, Florida	7:- 6-1-	
	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.

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	CESAR RESTREPO	13572 TURTLE MARSH LOOP # 238 ORLANDO, FL 32837	Add ✓ Remove
MGR	JAMES ELLIS	14190 CATHRINE ST ORLANDO, FL 32801	✓ Add Remove
			Add Remove
			Add Remove
<u></u>			Add Remove
			Add Remove
D. If amend	ling any other information, enter cl	nange(s) here: (Attach additional sheets, if necessar	w)  ヹ <b>ッ る</b>
			SEP 17 A
 Dated	9/15	2010	M 11: 27  M 11: 27  E, FLORIDA
	Signature of a ma	notes or authorized representative of a member	
	3,8	RICK SITZER	
	T	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00