(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
:
(Document Number)
Certified CopiesCertificates of Status
Special Instructions to Filing Officer:
A. LUNT
AUG - 6 2009
EXAMINER

Office Use Only



08/05/09--01035--004 **25.00

COVER LETTER

TO: Registration S Division of Co		•				
SUBJECT:F	ROPERTIES OF TH	IE TREASURE COAS	T, LLC			
Sobole 1.		ited Liability Company				
		L to 10 or				
	ondence concerning this matter					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	on the state of th					
	·	DENISE R. SNOW		_		
		Name of Person				
	PROPERTIES OF THE TREASURE COAST, LLC		- 1 <u>4</u> 2	200		
	Firm/Company		CAE	9 AUG	-	
	499 10TH COURT Address		TARY ASSE	-5	•	
				ma	₽	ì
	VE	VERO BEACH, FL 32962 City/State and Zip Code		OF STATE OF LORIDA	2009 AUG -5 PM 3: 04	•
	sh	ortsaler@comcast.net	difference -	E A	<u>+</u> -	
For further information	concerning this matter, please		uncation)			
		770	470 0447			
	Denise Snow of Person	at (<u>//2)</u> Area Code & Dayt	473-6117 ime Telephone Numb	ег		
Enclosed is a check for \$25.00 Filing Fee	the following amount: \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	ed) Certifie	illing Fee, cate of Stated Copy onal copy is		ed)
Regi: Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive	oorations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROPERTIES OF THE TREASUR	E COAST, LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	pany)	
The Articles of Organization for this Limited Liability Company were filed or	10/02/2003	and assigned
Florida document numberL03000038115		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability compan	v here:	
The new name must be distinguishable and end with the words "Limited Liability C"L.L.C."	Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:		2009 TALL
(Principal office address MUST BE A STREET ADDRESS)	2001	ARE S
		ASSEE
Enter new mailing address, if applicable:		7 3 M
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	STATE OF
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, ente	r the name of the new
registered agent and/or the new registered office address nere.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	aaress

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 **Type of Action Address Title** <u>Name</u> MELINDA SHAFFER MGR ✓ Add
☐ Remove 8036 WICLIF COURT JACKSONVILLE, FL 32244 ☐ Add ☐ Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) AUGUST 6 2009 Signature of a member or authorized representative of a member DENISE R. SNOW Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00