

L03000042878

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2011 JUN 24 PM 1:38
TALLAHASSEE FLORIDA
STATE

C. LEWIS

JUN 27 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Home at High Aspen Ranch, LLC
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:

Patrick E. Sessions

Name of Person

The Home at High Aspen Ranch, LLC

Firm/Company

1754 S. Bayshore Lane

Address

Coconut Grove, FL 33133

City/State and Zip Code

pesessions@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pat Sessions

Name of Person

at (305)

609-6443

Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

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

FILED
2011 JUN 24 PM 4:08

The Home at High Aspen Ranch, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/5/2003 and assigned
Florida document number L03000042878.

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:

1754 S. Bayshore Lane

(Principal office address MUST BE A STREET ADDRESS)

Coconut Grove, FL 33133

Enter new mailing address, if applicable:

1754 S. Bayshore Lane

(Mailing address MAY BE A POST OFFICE BOX)

Coconut Grove, FL 33133

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:

Patrick E. Sessions

New Registered Office Address:

1754 S. Bayshore Lane

Enter Florida street address

Coconut Grove

Florida

33133

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.

Patrick E. Sessions
If Changing Registered Agent, Signature of New Registered Agent

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>
MGR	J. Larry Rutherford	C/O SOUTHSTAR DEVELOPMENT 255 ALHAMBRA CIRCLE, SUITE 325 CORAL GABLES FL 33134	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Patrick E. Sessions	1754 S. Bayshore Lane Coconut Grove, FL 33133	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 6/20, 2011



Signature of a member or authorized representative of a member

Patrick E. Sessions

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JUN 24 PM 3:28

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