

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.
Account Number : 120010000025
Phone : (305) 935-3500
Fax Number : (305) 935-9042

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CENTERLINE HOMES AT BALDWIN PARK I, LLC**

Certificate of Status	0
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G. MCLEOD

Electronic Filing Menu

Corporate Filing Menu

MAY 21 2010 Help

EXAMINER

RECEIVED
10 MAY 20 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 20 AM 7:24

H10000120630 3

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CENTERLINE HOMES AT BALDWIN PARK I, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/09/2003 and assigned
Florida document number L03000051693

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VERO LAGO MANAGEMENT, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City Florida 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 Changing Registered Agent, Signature of New Registered Agent

H10000120630 3

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

Title	Name	Address	Type of Action
MGR	CRS ORGANIZATION, INC.	825 Coral Ridge Drive Coral Springs, FL 33071	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
S/T	STEPHEN I. MARGOLIS	825 Coral Ridge Drive Coral Springs, FL 33071	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	ROBERT HUTSON	825 Coral Ridge Drive Coral Springs, FL 33071	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
S/T	JEFFREY KRONENGOLD	825 Coral Ridge Drive Coral Springs, FL 33071	<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

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

Dated May 20, 2010

Signature of a member or authorized representative of a member

JEFFREY KRONENGOLD, Authorized Representative

Typed or printed name of signer

Page 2 of 2

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H10000120630 3