

LO3 000052287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

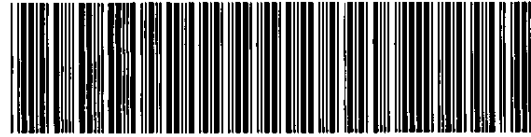
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATION
11 JUN 27 PM 12:15

N. Cutigan JUN 28 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Block 55 LLL
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:

Frank Gutta
Name of Person

Frank Gutta + Co. CPA's, P.A.
Firm/Company

490 Sawgrass Corp Pkwy #310
Address

Sunrise FL 33325
City/State and Zip Code

valencia@frankguttacpa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Gutta at (954) 452-8813
Name of Person 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

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DIVISION OF CORPORATION
11 JUN 27 PM 12:16

Block 55, 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 12/12/2003 and assigned Florida document number L03000052287.

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:

(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:

Frank Gutta

New Registered Office Address:

490 Sawgrass Corp Pkwy #310

Enter Florida street address

Sunrise

City

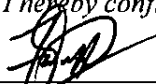
Florida

33325

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

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	William C Atkinson III	100 SE Third Ave Suite 1400 Ft. Lauderdale, FL 33394	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Wilson Atkinson	100 SE Third Ave Suite 1400 Ft. Lauderdale, FL 33394	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Donovan Jago	490 Sawgrass Corp Pkwy #310 Sunrise FL 33325	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Tamzin Bell	490 Sawgrass Corp Pkwy #310 Sunrise, FL 33325	<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 June 20, 2011.

X TBLL

Signature of a member or authorized representative of a member

Tamzin Bell

Typed or printed name of signee

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 11 JUN 27 PM 2:46