

# LD3000055075

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(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

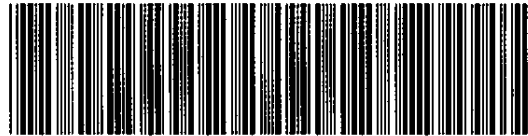
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FILED  
2010 JUN 21 PM 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

JUN 22 2010

EXAMINER

# Mowrey Law Firm, P.A.

Ronald A. Mowrey\*  
Rick A. Savage

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Crawfordville Office  
Courthouse Square  
Crawfordville, FL 32327  
Tel: (850) 926-7666

\* Also admitted in District of Columbia

June 18, 2010

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Articles of Amendment to Articles of Organization of One New Orleans Place, LLC

Dear Clerk:

Enclosed please find a cover letter and an Articles of Amendment to Articles of Organization of One New Orleans Place, LLC. I have also enclosed our firm's check #16981 in the amount of \$25.00 for the filing fee.

If you have any questions or need further information, please contact our firm. Thank you for your assistance in this matter.

Sincerely yours,



Jill Ivester  
Legal Assistant to Rick A. Savage

/jri

Enclosures

J:\OPEN\WB\One New Orleans Place, LLC\Letter\tr to SOS w amend AOO wpd

2010 JUN 21 PM 4:00 FAXED TO THE STATE OF FLORIDA DIVISION OF CORPORATIONS  
2010 JUN 21 PM 4:00 FAXED TO THE STATE OF FLORIDA DIVISION OF CORPORATIONS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: One New Orleans Place, 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:

**Ronald A. Mowrey**

Name of Person

**Mowrey-Law Firm**

Firm/Company

**515 N. Adams Street**

Address

**Tallahassee, Florida 32301**

City/State and Zip Code

**rmowrey@mowreylaw.com**

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

For further information concerning this matter, please call:

**Ronald A. Mowrey**

Name of Person

at ( **850** ) **222-9482**

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

2010 JUN 21 PM 12:39

One New Orleans Place, 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 12/22/2003 and assigned  
Florida document number L03000055075.

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:

2932 Crawfordville Highway

**(Principal office address MUST BE A STREET ADDRESS)**

Crawfordville, Florida 32326

Enter new mailing address, if applicable:

2932 Crawfordville Highway

**(Mailing address MAY BE A POST OFFICE BOX)**

Crawfordville, Florida 32326

**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:

Ronald A. Mowrey

New Registered Office Address:

515 N. Adams Street

*Enter Florida street address*

Tallahassee

Florida

32301

*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 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>
MGRM	Wakulla Holdings, LLC	2932 Crawfordville Highway Crawfordville, Florida 32326	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Thompson, Gerald W.	1136 McCook Road Quincy, Florida 32351	<input type="checkbox"/> Add <input checked="" 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

June 18

2010

Signature of a member or authorized representative of a member

Ronald A. Mowrey

Typed or printed name of signee

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2010 JUN 21 PM 12:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA