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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

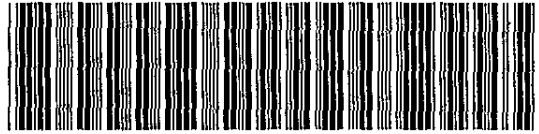
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LAW OFFICES OF  
**BAXTER, STROHAUER, MANNION & SILBERMANN, P.A.**

FIRST NATIONAL BANK OF FLORIDA BUILDING, SUITE 300  
1150 Cleveland Street  
Clearwater, FL 33755

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November 30, 2004

Florida Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Spencer II, LLC  
Summerfield, LLC  
Vogel Development, L.L.C.  
Wells Road, LLC  
Woody Woods, L.L.C.

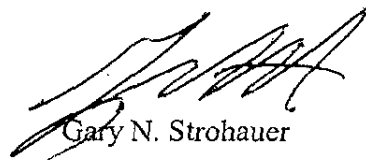
Dear Sir or Madam:

Enclosed are Articles of Amendment to Articles of Organization for all of the above-referenced limited liability companies. Our firm check for \$125 is enclosed for the filing of these Amendments.

Thank you for your assistance in this matter.

Very truly yours,

BAXTER, STROHAUER, MANNION &  
SILBERMANN, P.A.



Gary N. Strohauser

GNS/ss  
Enclosures

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TALLAHASSEE, FLORIDA


ARTICLES OF AMENDMENT  
TO ARTICLES OF ORGANIZATION OF  
SPENCER II, LLC

1. The date of filing of the Articles of Organization was January 16, 2004.
2. — The following amendment to the Articles of Organization was adopted by the limited liability company effective November 12<sup>th</sup>, 2004: —

ARTICLE V, Name and Address of Managing Members/Managers, is amended to read as follows: The name and address of managing members/managers are:

The Ryan Group, LLC, MGRM  
2502 N. Rocky Point Drive, Suite 1050  
Tampa, FL 33607

IN WITNESS WHEREOF, the undersigned Authorized Representative of this limited liability company has executed these Articles of Amendment on the 12<sup>th</sup> day of November, 2004.

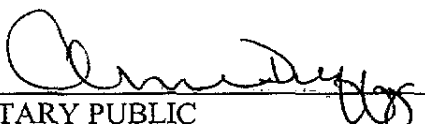
  
\_\_\_\_\_  
JOHN M. RYAN, Authorized Representative

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 12<sup>th</sup> day of November, 2004, by JOHN M. RYAN, Authorized Representative of Spencer II, LLC, on behalf of said limited liability company.



Anne Duffy  
My Commission DD133694  
Expires September 01 2006

  
\_\_\_\_\_  
NOTARY PUBLIC  
My Commission Expires: 9-01-06

Personally known X or Produced identification \_\_\_\_\_  
Type of identification produced \_\_\_\_\_

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TALLAHASSEE, FLORIDA  
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