

L04000012201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600177241256

RECEIVED
10 APR 28 AM 10:47
FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR
APR 28 2010
EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 28 AM 11:25



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : I20000000195
REFERENCE : 365177 5165425
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 28 AM 11:25

ORDER DATE : April 28, 2010

ORDER TIME : 9:19 AM

ORDER NO. : 365177-005

CUSTOMER NO: 5165425

DOMESTIC AMENDMENT FILING

NAME: GOVERNORS CROSSING 3, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER'S INITIALS: _____

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GOVERNORS CROSSING 3, LLC

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 28 AM 11:25

The Articles of Organization for this Limited Liability Company were filed on 02/13/2004 and assigned
Florida document number L04000012201

This amendment is submitted to amend the following:

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

KSH GREEN DRIVE, LLC

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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>
MGR	KSH MANAGEMENT LLC	431 FAIRWAY DRIVE SUITE 300 DEERFIELD BEACH, FL 33441	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	K FLORIDA, INC.	431 FAIRWAY DRIVE SUITE 300 DEERFIELD BEACH, FL 33441	<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 APRIL 26, 2010



Signature of a member or authorized representative of a member

BEATRICE T WILLIAMS

Typed or printed name of signee