L04000018642

(Requestor's Name)				
(Address)				
(Address)				
(City/	State/Zip/Phone	÷#)		
☐ BICK-NÞ	☐ WAIT	MAIL		
(Bu s i	ness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Fi	ling Officer:			

Office Use Only

G. MCLEOD

NOV 16 2010

EXAMINER



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SECRETARY OF STATE
AND AHASSEF, FLORID

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Brandon Palms Apart Ments LCC 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:						
Charles Dusseau Name of Person						
Brandon Palus Spantneuts LLC						
7455 S.W. 122 St						
Address Pinechest FL 33156 Ciry/State and Zip Code Ciry/State and Zip Code E-mail address: (to be used for fulure annual report notification)						
For further information concerning this matter, please call:						
Charles Dusseau at 305 586-4389 Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$55.00 Filing Fee & 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						
ARTICLES OF ORGANIZATION OF						
Brandon Pal) (Name of the Limited L. (A F	15 A O	ent Ments by as it now appears on iability Company)	our records.)	OVIS PH 2:26		
The Articles of Organization for this Limited Liab Florida document number O 40000	oility Company	were filed on	5/10/20	and assigned		
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liabi	ility 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:		7455 S.W.	122 5	5+		
Enter new principal offices address, if applicable: 7455 S.W. 122 St. (Principal office address MUST BE A STREET ADDRESS) PINE CIVEST, FC 33156				33156		
Enter new mailing address, if applicable:		7455 S.W. 122 St				
(Mailing address MAY BE A POST OFFICE BOX)		PINE Chest, FL 33156				
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:	Char	les Dus	seau			
New Registered Office Address:	7455	· · · · · · · · · · · · · · · · · · ·				
	Pinecrest Enter Florida street address Pinecrest Florida Street address City Florida Zip Code					
		City		esp 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

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** Name <u>Address</u> Type of Action ☐ Add Remove **M**Add Remove ☐ Add Remove CHARMAN Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated signature of winember or authorized representative of a member lanc LNMan

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00