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EXAMINER



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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Koresh	an/Cypress View, LI	LC ited Liability Company)	
	(Mano of Emi	постышну сотрану)	
The enclosed Articles of	'Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	James R. Gillis		
		(Name of Person)	
	Gillis & Assoc., Inc.		
		(Firm/Company)	
	2450 Tarpon Road		
		(Address)	
	Naples, Florida 34102		
		(City/State and Zip Code)	
For further information	concerning this matter, please c	call:	
Gary L. Green, Esq.		at (239) 649-6911	
(Name	of Person)	(Arca Code & Daytime T	Telephone Number)
Enclosed is a check for t	he 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 Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Koreshan/Cypress View, LLC				
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our record	<u>s.</u>)		
· (A Frontia Elimited E	mornly Company)			
The Articles of Organization for this Limited Liability Company	were filed on 7/23/04	and assigned		
Florida document number L04000022663				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and end with the words "Limit	ted Liability Company," the designar	tion "LLC" or the abbreviation		
"L.L.C."		6 ≥ S		
Enter new principal offices address, if applicable:	2450 Tarpon Road			
* * *	Naples, Florida 34102			
(Principal office address MUST BE A STREET ADDRESS)	Napies, Horida 04102			
		12 290		
Enter new mailing address, if applicable:		? 3		
(Mailing address MAY BE A POST OFFICE BOX)		27		
•				
B. If amending the registered agent and/or registered of		nter the name of the new		
registered agent and/or the new registered office address here	<u>c</u> :			
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 = Mu MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Stephanie Miller	9250 Corkscrew Road Estero, Ft. 33928	Add Remove
MGRM	Gillis & Assoc., Inc.	2450 Tarpon Road Naples, Florida 34102	Add Remove
			Add Remove
		•	Add Remove
			Add
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessa	
Dated	leptember 29, 2008) —	
	*	er or authorized representative of a member	
	Stephanie Mill	er	

Page 2 of 2

Filing Fee: \$25.00