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B. BOSTICK
MAY 2 2 2012

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Capital Park, uc.  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:
R. Car Hon Dean, JR Name of Person
2065 Thomas ville Road
Address
Talkhissee Fc 32308 City/State and Zip Code
Carttona carttondan ian  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person  Area Code & Daytime Telephone Number  Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\ \text{Certified Copy} \\ \text{(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

CapiTAL YARL,	LLC.		
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
(A Fronda Emilieu Er	dointy Company)		
The Articles of Organization for this Limited Liability Company	were filed on and assigned		
Florida document number <u>L D 40000 2777 </u> 8.	4/12/2004		
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 "Limite" L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	no chance		
(Principal office address MUST BE A STREET ADDRESS)	0		
	12 社		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Enter new mailing address, if applicable:	no change sin to		
(Mailing address MAY BE A POST OFFICE BOX)	777		
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:	no change		
New Registered Office Address:	•		
	Enter Florida street address		
	, Florida		
<del></del>	City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	•		
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete performance of my duties, and I am familiar with and rovided for in Chapter 608, F.S. Or, if this document is address, I hereby confirm that the limited liability		
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

Title Name Address **Type of Action** ☐ Remove 🗌 Add ☐ Remove Add Remove  $\square$ Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2012 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00