

L04000047819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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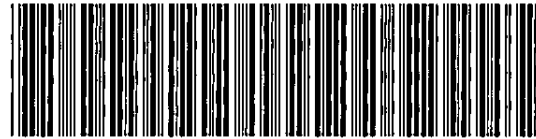
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEACHES INVESTMENTS LLC
(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:

Robert H. Matteson
(Name of Person)

BEACHES INVESTMENTS M-2 LLC
(Firm/Company)

99 COMPASS POINTE WAY UNIT 208
(Address)

WATENSOUND, FL. 32413
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert H. Matteson at (336) 215-6512
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Beaches Investments, LLC

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

The Articles of Organization for this Limited Liability Company were filed on Jun 24, 2004 and assigned
Florida document number 404000047819

This amendment is submitted to amend the following:

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

Beaches Investments M-2, 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)

99 COMPASS POINTE WAY #208
WATER SOUND, FL.
32413

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 613308
WATER SOUND, FL.
32461

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:

Robert H. Matheson

New Registered Office Address:

99 COMPASS POINTE WAY #208
(Enter Florida street address)

WATER SOUND, Florida 32413
(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.

Robert H. Matheson
(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
MGR	Robert H. Matteson	99 COMBASS POINT WAY UNIT 208 WATERBURY, FL. 32413	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	SANDY MATTESON PERSON	2014 PINE ISLAND CIRCLE MIRAMAR BEACH FL 32558	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 2.20.09

Robert H. Matteson

Signature of a member or authorized representative of a member

Robert H. Matteson

Typed or printed name of signee

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