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(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Basilioss Ellat, Haille)		
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(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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T. CLINE

FEB - 3 2010

EXAMINER

SECRETARY OF STATE

010FEB-2 M 10:4

COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: BLACK CREEK R	V RESOLT LLC	
	ited Liability Company	
The enclosed Articles of Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
MICHELLE BRAOCO IN	RUDOY Name of Person	
BRADCO IN	Firm/Company	
3642 PEAC	HTREE ROAD Address	
ATLANTA GO Fichard @ bro	City/State and Zip Code adco-attanta Cov (to be used for future annual report notifical	ion
For further information concerning this matter, please of		,
MICHELLE RUOM Name of Person	at (404) 233 – 166 Area Code & Daytime T	· · · · · · · · · · · · · · · · · · ·
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee; Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER	R ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLACKCESEK R	V RESULT	LC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now Limited Liability Con	appears on our reco	rds.)	
The Articles of Organization for this Limited Liability	Company were filed	on <u>07/27/20</u> 0	11 and ass	igned
Florida document number LOH 0000 555	154			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	mited liability compa	any here:		
BC RV RESORT L	ic		· · · ·	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability	Company," the design	nation "LLC" or the a	ıbbreviation
Enter new principal offices address, if applicable:		,_		
(Principal office address MUST BE A STREET ADL	ORESS)		5.6 3	
	·	- 11 8 80	11-53	
			3-2	Te = 21
Enter new mailing address, if applicable:				2 :
(Mailing address MAY BE A POST OFFICE BOX)				* .
			2	
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		ss on our records,	enter the name of	of the new
Name of New Registered Agent:				
New Registered Office Address:		`		
		Enter Florida st	reet address	
		, Flo	orida	
	City		Zip Code	е

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma $MGRM = N$	inager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			AddRemove
			Add Remove
			AddRemove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter cl	nange(s) here: (Attach additional she	
_			-
·			
Dated	ANUMPY 27.	2010	
	FRANK B. REC	mber or authorized representative of a m OSHAW yped or printed name of signee	ember

Page 2 of 2

Filing Fee: \$25.00