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T. CLINE

DEC - 8 2008

EXAMINER

## **COVER LETTER**

SUBJECT: Water's	Edge Realty/ St. Lu (Name of Limi	cie West, LLC ted Liability Company)		O	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	Lawrence S. Klitzman				
		(Name of Person)			
	Lawrence S. Klitzman, P	.A.			
		(Firm/Company)			
	1391 Sawgrass Corporat	e Parkway			
		(Address)			
	Sunrise, Florida 33323			2008 TAE	
		(City/State and Zip Code)		2000 DEC -5 AM II: 00 SECRETARY OF STATE TALLAHASSEE, FLDRID	and a
For further information co	oncerning this matter, please c	all:		SEE S	
Lawrence S. Klitzman		at ( 954 ) 384-4421			*
(Name o	f Person)	(Area Code & Daytime T	elephone Number)	8	
Enclosed is a check for th	e following amount:				
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

Water's Edge Realty/ St. Lucie \(\frac{Name of the Limite}{7}\)	West, LLC d Liability Company as it now A Florida Limited Liability Con	appears on our records.)	
The Articles of Organization for this Limited I			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability compa	any here:	
The new name must be distinguishable and end w 'L.L.C."	ith the words "Limited Liability	Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if appli	<del>_</del>		
Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	7A 200	
		- FE 38 - TI	
Enter new mailing address, if applicable:		THE C	
Mailing address MAY BE A POST OFFICE	E BOX)	YOF STEEL OF	
B. If amending the registered agent and registered agent and/or the new registered of		ss on our records, enter the name of the ne	
Name of New Registered Agent:	Lawrence S. Klitzman		
New Registered Office Address:	1391 Sawgrass Corporat		
	O verden	(Enter Florida street address)	
	Sunrise (City)	, Florida 33323 (Zip Code)	
	12177	( 1)	

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Theodore A. Schiff	600 Village Square Crossing #101 Palm Beach Gardens, Florida 33410	
MGR	T&R Associates, LLC, a WY LLC	600 Village Square Crossing #101  Palm Beach Gardens, Florida 33410	Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change(	(s) here: (Attach additional sheets, if necessary)	2008 DEC -5
		E. FLORIU	
Dated Decemb	4		
_	Signature of a member of	or authorized representative of a member	<del></del>
-	Lawrence S. Klitzman		
	i yped o	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00