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**EXAMINER** 



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DIVISION OF CORPORATIONS

## **COVER LETTER**

TO:	Registration Sect Division of Corp			
SUBJE	ECT:	DIVELLO	FAMILY, L.L.C.	
5050			ted Liability Company	
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all correspond	dence concerning this matter	to the following:	
		BERRY	J. WALKER, JR., ESC	UIRE
		WAL	KER & TUDHOPE, P.	<b>A</b>
		1053 MAITLANE	CENTER COMMON	S BLVD. #200
			Address	
		N	MAITLAND, FL 32751	
		•	City/State and Zip Code	
		E-mail address: (1	@walkerandtudhope.co	t notification)
For fur	ther information cor	cerning this matter, please c	all:	
	<del></del>	J. Walker, Jr.	at (_407_)	478-1866
	Name of I	erson	Area Code & I	Daytime Telephone Number
Enclose	ed is a check for the	following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 see, FL 32314	Registration Division of C Clifton Build	Corporations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT **ARTICLES OF ORGANIZATION**

OIVISION OF CORPORATIONS
OS AUG 21
09 AUG 31 AM 8: 37

•	Or	OS AUG 2.	MATIN	
DIVELLOF	AMILY, L.L.C.	~ 37	AM 8: 37	
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appea	rs on our records.)		
(A Florida Limited	d Liability Company)			
The Articles of Organization for this Limited Liability Compar	ny were filed on	08/13/2004	and assigned	
Florida document numberL0400060408				
This amendment is submitted to amend the following:				
A Teamonding was and and a second as a sec	1 111.			
A. If amending name, enter the new name of the limited lia	bility company he	<u>re</u> :		
The year name must be distinguished; and a decided at the second			T 601 11 11 11 11	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Comp	any," the designation "L	LC" or the abbreviatio	
Entar new puincing offices address if annihilation	1052 MAITI	AND CENTED CO	MANAONIC DI VID	
Enter new principal offices address, if applicable:		AND CENTER CO	MMUNS BLVD.	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 200	EL 00754		
	MAITLAND,	FL 32/51		
Enter new mailing address, if applicable:		AND CENTER CO	MMONS BLVD.	
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	SUITE 200		
	MAITLAND,	FL 32751		
<b>.</b>		_		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		our records, <u>enter t</u>	he name of the nev	
	<del></del> -			
Name of New Registered Agent: BERRY J.	WALKER, JR.,	ESQUIRE		
4050 1445			D 01117F 000	
New Registered Office Address: 1053 MAI		COMMONS BLV  ter Florida street addi		
		uer rioriaa sireei aaai		
	MAITLAND	, Florida	32751	
	City		Zip Code	
Now Pagistavad Agant's Signatura if abanging Pagistavad Agan	4.			

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>	<u>Address</u>	Type of Action
MGR	BERRY J. WALKER, JR.	1053 Maitland Cntr. Commons Blvd. Suite 200 Maitland, FL 32751	Add Remove
MGRM_	Frederick, Larry	P.O. Box 3116 Clearwater, FL 33767	Add Remove
MGRM_	Perkins, Heather	27615 U.S. Highway 27 Suite 112-204 Leesburg, FL 34748	Add Remove
			Add Remove
	Was a state of the		Add Remove
			Add Remove
D. If amend	ing any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
<del></del>			<del>-</del>
			_ _
Dated	July 28	2009 .	
	Signature of a m	nember or authorized representative of a member	
		Berry J. Walker, Jr. Typed or printed name of signee	<del></del>
		1) pod or printed name of organe	

Page 2 of 2

Filing Fee: \$25.00