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G. MCLEOD

JUL 1 - 2010

EXAMINER



900163759759

04/12/10--01015--023 **25.00

10 JUN 30 AM 10: 40

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ATTN: GI	NA	COVER LETTER	Fax # : 850. 245.6036
TO: Registration Division of C		,	
SUBJECT:	he First Hal	PO Trust LLC inted Liability Company	
The enclosed Articles	of Amendment and fee(s) are s	abmitted for filing.	
Please return all corres	spondence concerning this matt	er to the following:	
	Rica	ardo Ferrer	
		Name of Person	
	11495	Lake Underhi	11 Rd
	D	rlando, FL 3	2825
		City/Sime and Zip Code	
For further information	n concerning this matter, pleas	; (to be used for future annual report no • call:	RHIGHOOD)
Rica	•	407, 399.	7788 ime l'elephone Number
Enclosed is a check to	or the following amount: S30 00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy {additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Gertified Copy (additional copy is enclosed)
МА	HLING ADDRESS:	STREET/COU	RIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

	F AMENDMENT	TA 6
	TO ORGANIZATION	F-0:1
	OF .	至
The First Hal	pany as it now appears on our records,) ed Liability Company)	JUN 30 AM 10: 40
The Articles of Organization for this Limited Liability Comparition and Comparition of the Articles of Organization for this Limited Liability Comparition of the Articles of Organization for this Limited Liability Compa	any were filed on 8 16 2004	and assignment
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited $\mathbb N$	jability company here:	
The new name must be distinguishable and end with the words "LAAC."	imited Liability Company," the designation "Li	.C" or the abbreviation
Enter new principal offices address, if applicable:	Ma	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	nla	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address in		ne name of the new
Name of New Registered Agent:	Na	
New Registered Office Address:	Enter Florida street addr	ess
	. Florida	
	Ciw	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	

I hereby accept the appointment as registered agent and agree to act in this cupacity. 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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

	Member being added or removed from	on our records:	
MGR = Man MGRM = M	aager lanaging Member		
<u>Title</u>	Name	Address	Type of Action
MGR Cinstead	Ricardo Ferrer	11495 Lake Unolerhill R Orlando, FL 32825	Add Remove
Presid	ient)		Add
<u>MGRM</u>	DAVID HALDERN	11495 Lake Underhill Ro Driando, FL 32825	Network
<u> </u>			Add Remove
			Add Remove
and the second s			Add
		e(s) here: Much additional sheets, if necessary: Ferrer as President	
	-	Ferrer as president. ADDING David Hal	pern
_0	15 MGRM.		
Dated	une 25 . 20	<u> </u>	
		or authorized representative of a member	
	KICAI Typed	rdo Ferrer or printed name of signee	

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Filing Fee: \$25.00