

L04 000071021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

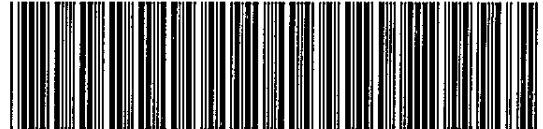
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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LAW OFFICES OF  
ERIC M. SAUERBERG, P.A.  
200 VILLAGE SQUARE CROSSING  
SUITE 102  
PALM BEACH GARDENS, FLORIDA 33410

TEL: (561) 776-0330  
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ERIC M. SAUERBERG\*\*  
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ERIC@EMSATTORNEYS.COM

M. KRISTA BARTH\*  
\*ADMITTED TO FL, MD & D.C.  
BARS. CERTIFIED FAMILY &  
COUNTY COURT MEDIATOR  
KRISTA@EMSATTORNEYS.COM

December 5, 2005

Division of Corporations  
Registration Section  
PO Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

Please find enclosed various Amendments and an Application to register a foreign limited liability company to transact business in Florida.

Articles of Amendment of Summit Pines, LLC	\$25
Articles of Amendment of Nopec, LLC	\$25
Articles of Amendment for a foreign LLC of Willex, LLC/Baker Shoppes, LLC, MPS I, LLC and Torino Park, LLC	\$75
Application to transact business in FL for Baker Shoppes 2, LLC	\$125

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I have enclosed a check in the amount of \$250 for the filing fees of all the entities.

If you have any questions, please do not hesitate to call.

Sincerely,



Eric M. Sauerberg  
EMS/mp

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Summit Pines, 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:

Eric M. Sauerberg

(Name of Person)

Eric M. Sauerberg, P.A.

(Firm/Company)

200 Village Square Crossing Suite 102

(Address)

Palm Beach Gardens, FL 33410

(City/State and Zip Code)

For further information concerning this matter, please call:

Eric M. Sauerberg

(Name of Person)

at ( 561 ) 776-0330

(Area Code & Daytime Telephone Number)

Enclosed 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 enclosed)

☐ \$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

**FILED**  
05 DEC -9 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Summit Pines, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on September 29, 2004 and assigned document number L04000071021

**SECOND:** This amendment is submitted to amend the following:

Article II is hereby amended to reflect the following:

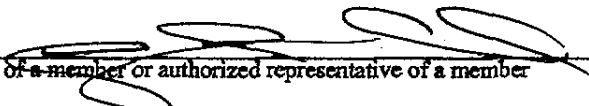
The street and mailing address of the limited liability company is:

11900 SE Federal Highway, Suite 213

Hobe Sound, FL 33455

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated November 21, 2005

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Jason Ackner

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

**FILED**  
05 DEC -9 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA