## 104000077113

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(Address)				
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D. BRUCE
DEC 14 2010
EXAMINER

## **COVER LETTER**

	osed Articles of			
The enclo	osed Articles of	Name of Limi Amendment and fee(s) are sub	ted Liability Company omitted for filing.	
Please ret	turn all correspo	ondence concerning this matter		
			to the following:	
		Scott Rhoades		
			Name of Person	
			Firm/Company	and of substance
			PO Box 1926	<del></del>
		P.o.	nita Springs, FL 34133	£
		Bu	City/State and Zip Code	
		!	srhoades2@cox.net	DEC
E 6.4		E-mail address: (	to be used for future annual report notification	<u>π</u> -< ω
For rurine	er information of	concerning this matter, please of	2411:	
<del></del>		cott Rhoades	at ( 239 ) 438- Area Code & Daytime Telep	7510
Enclosed	is a check for t	he following amount:		
\$25.00	0 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		ration Section on of Corporations ox 6327	STREET/COURIER AND Registration Section Division of Corporations Clifton Building 2661 Executive Center Courier Tallahassee, FL 32301	ircle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Romeo & Juliet Cu (Name of the Limited Liability Compa (A Florida Limited I	stom Homes, LLC  ny as it now appears on our records.)  Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document numberL04000077173	were filed on10/25/2004	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
AppleCreek General				
The new name must be distinguishable and end with the words "Limit"L.L.C."	ited Liability Company," the designation	n "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	547 Charlemagne Blvd.	Service Community		
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34112	0		
		EC II		
		SSE SSE		
Enter new mailing address, if applicable:	PO Box 1926			
(Mailing address MAY BE A POST OFFICE BOX)	Bonita Springs, FL 34133	25 % C		
		<u> </u>		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	er the name of the new		
New Registered Office Address:	Enter Florida street address			
	. Florida			
	City	Zip Code		

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> <u>Address</u> **Type of Action** Mgrm Ryan Rogers 547 Charlemagne Blvd. **✓** Add Naples, FL 34112 Remove □ Add Remove Add ☐ Remove Add Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 7th 2010 Dated Signature of a member or authorized representative of a member Kristen Rhoades Typed or printed name of signee

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Filing Fee: \$25.00