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•				
(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL.		
(Ви	isiness Entity Nar	me)		
(Do	ocument Number)			
Certified Copies	_ Certificates	Certificates of Status		
Special Instructions to Filing Officer:				
		:		
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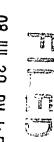
Office Use Only



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07/30/08--01014--008 **120.00

SECRETARY OF STATE



COVER LETTER

SUBJECT: Colonial	·							
								
.								
The enclosed Articles of Amendment and fee(s) are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
	Peter A. Brown							
(Name of Person)								
	(Firm/Company)							
	1225 Sharon Place							
(Address)								
Winter Park, FL 32789								
(City/State and Zip Code)								
For further information concerning this matter, please call:								
Peter A. Brown	at (203 ₎ 535-6203							
	e of Person) (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)	Certificate of Status & Certified Copy (additional copy is enclosed)					

MAILING ADDRESS:

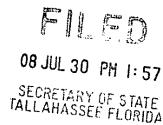
TO:

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



			HOMION
. Colonial Oaks Home Providers LL	.C		
•	_	v as it now appears on our	records.)
(A	Florida Limited L	y as it now appears on our iability Company)	
The Articles of Organization for this Limited Lia	ability Company	were filed on 10/28/2004	and assigned
Florida document number L04000078506			-
Florida document number 234366676666	,		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
The new name must be distinguishable and end with "L.L.C."	i the words "Limit	led Liability Company," the	designation "LLC" or the abbreviation
L.L.C.			
Enter new principal offices address, if applica	ıble:	1225 Sharon Place	
• • • • • • • • • • • • • • • • • • • •		Winter Park, FL 32789	
(Principal office address MUST BE A STREET	<u>r address)</u>	Willer Park, FL 32709	
73		1225 Sharon Place	
Enter new mailing address, if applicable:		1225 Sharon Place	
(Mailing address MAY BE A POST OFFICE BOX)		Winter Park, FL 32789	
D 10 11 11 11 11			
B. If amending the registered agent and/o registered agent and/or the new registered off			ords, enter the name of the nev
registered agent and/or the new registered or	ice address here		
Name of New Registered Agent:	Peter A. Brown	1	
New Registered Office Address:	1225 Sharon F		
	rida street address)		
	Winter Park		E 32780
	vviiller Fark	(C:t-)	, Florida 32789
		(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 Title <u>Name</u> Address **Type of Action** MGR' Michael Grady P.O. Box 251425 ■ Add ■ Remove Daytona Beach, FL 32125 Peter A. Brown MGRM 1225 Sharon Place **≢** ∕ Add Winter Park, FL 32789 Remove MGRM Mary Beth Dunn Brown <u>∎</u> Add 1225 Sharon Place Winter Park, FL 32789 ■ Remove **∫** Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated July 14 2008 Signature of a member or authorized representative of a member Michael Grady Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00