

Apr. 23. 2009 10:14 AM

SALVATORI & WOOD

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LD4000091874

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : SALVATORI & WOOD, BUCKEL & WEIDENMILLER, PL  
Account Number : I20030000112  
Phone : (239) 552-4100  
Fax Number : (239) 649-1706

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TALLAHASSEE, FLORIDA

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RAINTREE & PRICE, LLC

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D. BRUCE

APR 24 2009

EXAMINER

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Raintree & Price, 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:

C. Lane Wood

(Name of Person)

Salvatori, Wood, Buckel & Weidenmiller

(Firm/Company)

8132 Strada Place, Fourth Floor

(Address)

Naples, FL 34104

(City/State and Zip Code)

For further information concerning this matter, please call:

C. Lane Wood

(Name of Person)

at ( 239 ) 552-4100

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

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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

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**09 APR 23 AM 10:03**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

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

Raintree & Price, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 20, 2004 and assigned  
Florida document number L04000091874.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3050 N. Horseshoe DriveSuite 105Naples, FL 34104

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3050 N. Horseshoe DriveSuite 105Naples, FL 34104

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**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Salvatori, Wood, Buckel & Weldenmiller

New Registered Office Address:

9132 Strada Place, Fourth Floor

*(Enter Florida street address)*

Naples

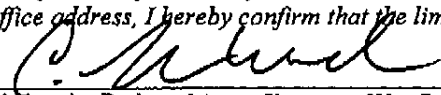
*(City)*

Florida 34108

*(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)

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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>	<u>Type of Action</u>
MGR	Michael J. Carr, Sr.	12801 Pondapple Drive West Naples, FL 34119	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	William T. Higgs	3050 N. Horseshore Drive Suite 105 Naples, FL 34104	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

Dated April 23

2009

  
Signature of a member or authorized representative of a member

C. Lane Wood, Esq., Authorized Representative

Typed or printed name of signee

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Filing Fee: \$25.00

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