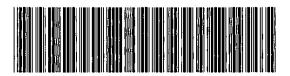
L0.500008736

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phon	e #)
PICK-UP WAIT	MAIL
(Business Entity Na	
Certified Copies Certificate	s of Status
Special Instructions to Filing Officer:	



100147321181

03/26/09--01011--002 **25.00

OP HAY II PH I: 20
SECRETARY CE STATE
ALLORIUS

Office Use Only

S. HAWKES

EXAMINER

S. HAWKES

EXAMINER



March 27, 2009

ARNOLD MANDELL 1501 BROADWAY 22ND FLOOR NEW YORK, NY 10036

SUBJECT: NORTH PORT LOTS, LLC

Ref. Number: L05000008736

We have received your document for NORTH PORT LOTS, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 609A00010436

Suzanne Hawkes Regulatory Specialist II

Division of Comparations D.O. DOV 6207 Tollahossos Florida 20214

COVER LETTER

TO:	Registration Section Division of Corporations		
٠.	TO CIT		
SUB		RT LOTS, LUC	
	(Nam	e of Limited Liability Company)	
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Pleas	e return all correspondence concerni	ng this matter to the following:	
	•		
A.	rnold Mandell		
	(Name of Person)		
M	andell & Mandell		
	(Firm/Company)		
7	501 December 23-4 F1		
	501 Broadway, 22nd Floor (Address)		
	(Fiduless)		
N	ew York, New York 10036		
	(City/State and Zip Code)		
For f	urther information concerning this m	atter, please call:	
Α.	rnold Mandoll	at (212) 459-0500	
	rnold Mandell (Name of Person)	(Area Code & Daytime Telephone Number)	
	(Tunio of Folion)	(rica code de Bajonno rotopheno reambor)	
	emper/compen apprec.	MAILING ADDRESS:	
	STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section		
	Division of Corporations	Division of Corporations	
	Clifton Building P.O. Box 6327		
	2661 Executive Center Circle Tallahassee, Florida 32314		
	Tallahassee, Florida 32301		
	Enclosed is a check for the follow	wing amount:	
	■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NORTH PORT LOTS, LLC			
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.)	o A	
(A Florida Difficu Di	additty Company)		
The Articles of Organization for this Limited Liability Company	were filed on January 27, 200	5 Cand assigned	
Florida document number <u>L05000008736</u>			
	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	<u>lity company here</u> :	7, ,	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:	1501 Broadway - 22nd F	loor	
(Principal office address MUST BE A STREET ADDRESS)	ADDRESS) New York, New York 10036		
Enter new mailing address, if applicable:	1501 Broadway - 22nd F.	loor	
(Mailing address MAY BE A POST OFFICE BOX)			
	THE TANKS ITEM TO LANGUE		
•			
B. If amending the registered agent and/or registered off	ice address on our records, ente	er the name of the new	
registered agent and/or the new registered office address here		of the name of the new	
N. CN D. '4 . J.A. 4			
Name of New Registered Agent:			
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 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 = Ma MGRM = N	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	······································		
<u></u>			= "
			- D
			Artid Correct Remove
	,		**
			Remove
D. If amen	ding any other information, ente	r change(s) here: (Attach additional sh	eets, if necessary.)
	April 30	2009	
		member or authorized representative of a r	nember
	Arnold Man	1e11 Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00