

LOS0000/8998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

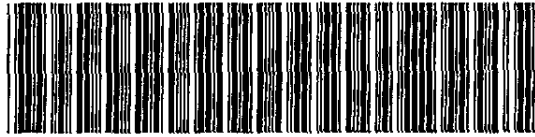
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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 2137 Five Oaks, 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. Randolph Coleman

(Name of Person)

The Coleman Law Firm, L.C.

(Firm/Company)

9250 Baymeadows Rd., Suite 450

(Address)

Jacksonville, Florida 32256

(City/State and Zip Code)

For further information concerning this matter, please call:

Sandra M. Bowen, Legal Assistant

(Name of Person)

at ( 904 ) 448-1969

(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)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

2137 Five Oaks, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 2/24/2005 and assigned document number L05000018998.

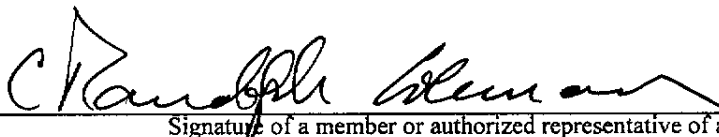
**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

ARTICLE II – ADDRESS is amended as follows:

The mailing address of the company is 3811 University Blvd., West, Suite 21, Jacksonville, Florida 32217.

The street address of the principal office of the company is 3811 University Blvd., West, Suite 21, Jacksonville, Florida 32217.

Dated June, 2005.

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

C. Randolph Coleman

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

**Filing Fee: \$25.00**