

LOS0000 36663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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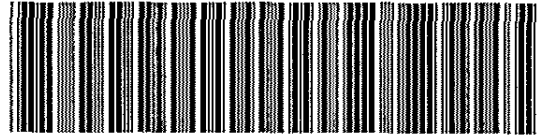
(Business Entity Name)

(Document Number)

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*[Signature]*

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FOUNTAINS PROFESSIONAL CENTER 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:

JASON W. HOWE

(Name of Person)

HOWE REAL ESTATE, INC.

(Firm/Company)

521 NE 11TH AVENUE

(Address)

FORT LAUDERDALE, FL 33301

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JASON W. HOWE

(Name of Person)

at ( 954 ) 240-2550

(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**

FOUNTAINS PROFESSIONAL CENTER LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on APRIL 14, 2005 and assigned document number L05000036663.

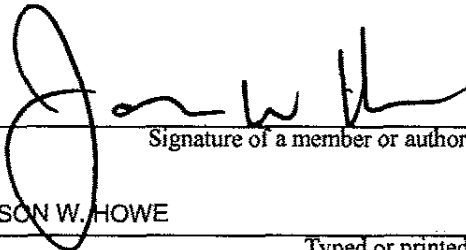
**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

- 1) HOWE REAL ESTATE, INC. HAS REPLACED JASON W. HOWE AS MANAGING MEMBER.
- 2) IN ADDITION, THE MEMBERSHIP NOW CONSIST OF THE FOLLOWING:

JASON W. HOWE  
HOWE REAL ESTATE, INC. as Managing Member  
MICHAEL ACCARRINO  
MARC SILVERSTEIN  
WILLIAM S. SPENCER  
GARY ELZWEIG

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Dated AUGUST 5, 2005



Signature of a member or authorized representative of a member

JASON W. HOWE

Typed or printed name of signee

**Filing Fee: \$25.00**