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M. THOMAS

JAN 8 2009

EXAMINER

COVER LETTER

Registration Section TO: **Division of Corporations**

À.

REAL PROPERTY SUNLAND

(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:

(Firm/Company)

GRAND RESERVE BLUD.

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

at (772) 979-6258 (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)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNLAN						
(Name of the Limited Liab (A Flor	oility Company as it now appears on our records. ida Limited Liability Company))				
The Articles of Organization for this Limited Liability Florida document number <u>L05000458</u>		and assigned				
This amendment is submitted to amend the following	g:					
A. If amending name, enter the new name of the	limited liability company here:	•				
SUNLAND REAL PROPE	ERTY LLC	·				
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation	on "LLC" or the abbreviation				
		09 PALI				
Enter new principal offices address, if applicables	·	<u> </u>				
(Principal office address MUST BE A STREET AL	DDRESS)					
		OF PH				
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX	0	≥m €i				
	·					
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:						
New Registered Office Address: (Enter Florida street address)						
	·					
	, Florida (City)	(Zip Code)				
	(0.13)	(Zip Couc)				

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 w the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar wit accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this docume 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 = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
·			Add Remove
			Add
,			Remove
			Add · Remove .
	· 		Add Remove
			Add Sa
			AND Add P
<u>.</u>			Add Personal Remove
D. If amend	ling any other information, enter chai	nge(s) here: (Attach additional sheets, if necessary.)	>'' હ ਜੋ
			_
			-
Dated DE	CEMBER 22 , 20	DO 8	_
(Signature of a member of the VAN	ber or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00