L05000046553

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
SLOTEN INGTON BY PHONETO				
DATE 5/30/08				
DCC EXAM THE				

Office Use Only



700129916457

05/29/08--01006--001 **30.00

OR MAY 29 PM 1: 4
SECRETARY OF STATE

T. HAMPTON MAY 8 0 2008

EXAMINER

COVER LETTER

Division of Cor	porations		
SUBJECT: Waterst	tone Real Estate, L.I	L.C.	9
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Sharon Ingram	<u></u>	
		(Name of Person)	
	Waterstone Real Estate,	L.L.C.	
		(Firm/Company)	-
	1008 Airport Road, Suite	С	
		(Address)	
	Destin, Florida 32541		
		(City/State and Zip Code)	
For further information of	on coming this metter planes or	s.11.	
For further information co	oncerning this matter, please ca	111:	
Sharon Ingram		at (850) 269-5204	
(Name o	of Person)	(Area Code & Daytime T	elephone Number)
Total 15 and 10 d	6.11	•	
Enclosed is a check for the			
□ \$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:

TO:

Registration Section

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

WATERSTONE REAL ESTATE, L.L.C.		
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records d Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on May 10, 2005	and assigned
Florida document number L05000046553		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
The new name must be distinguishable and end with the words "Li 'L.L.C."	mited Liability Company," the designati	
Enter new principal offices address, if applicable:		O8 SECT
<u> Principal office address MUST BE A STREET ADDRESS)</u>		HAS T
Enter new mailing address, if applicable:		LED 29 PM 1: SSEE, FLOR SSEE, FLOR
Mailing address MAY BE A POST OFFICE BOX)		A +-
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida stre	et address)
	, Florid	
	(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 affiending or Managin	g the Managers or Managing Members of Member being added or removed from	n our records, <u>enter the title, name, and addiour records</u> :	ress of each Manager
MGR = Ma MGRM = N	nager Aanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
BRKR	Thereoa Laine	1019 Periwinkle Way Janibel Island, FL 93957	Add Remove
BRKR MGR	Howard Kevin Granberry	1008 Airport Road Juite C Destin, FL 32541	Add. Remove
BPKR	Edward H Seymour, JR		Add Remove
			Add Remove
	•		Add Remove
			Add Remove
D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary	8
		LLAHASSEE, FLORIOA	FIL.
Dated	May 21 200)당 _	 .
	Signature of a member of	r authorized representative of a member	
	Michae Typed or	Printed name of signee	<u>_</u>

Page 2 of 2

Filing Fee: \$25.00