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SECRETARY OF STATE

COVER LETTER

TO: Registration Sect Division of Corpo		,	
SUBJECT: Watersto	ne Residential Lea	ising, L.L.C.	
	(Name of Limi	ted Liability Company)	
The enclosed Articles of Ar	mendment and fee(s) are subr	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Sharon Ingram	,	
		(Name of Person)	
·	Waterstone Residential L	easing, L.L.C.	
		(Firm/Company)	
	1008 Airport Road, Suite	С	
		(Address)	
	Destin, FL 32541	•	
		(City/State and Zip Code)	
For further information con	cerning this matter, please ca	all:	
Sharon ingram		at (850) 269-5204	
(Name of			elephone 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

FILED

08 JUN -2 AMII: 09

SECRETARY OF STATE TALLAHASSEE FLORIDA

Waterstone Residential Leasing, L.L.C.		
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our a Limited Liability Company)	records.)
•		
The Articles of Organization for this Limited Liability	Company were filed on May 10, 200	and assigned
Florida document number L05000046560	·	
This amendment is submitted to amend the following:	•	
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
The new name must be distinguishable and end with the w 'L.L.C."	ords "Limited Liability Company," the o	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADL	ORESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		

B. If amending the registered agent and/or regi		rds, enter the name of the new
registered agent and/or the new registered office ad	dress here:	
Name of New Registered Agent:	-	
New Registered Office Address:		
· · ·	(Enter Flor	ida street address)
		, Florida
- Comment	(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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Ma	naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Edward H. Seymour	1008 Airport Road 20ite C Destin, FL 32541	Add Remoye.
MGR	Howard Kevin Granberry	1008 Airport Road Juite C Destin, FL 32541	Add. Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	08.JUN-2 AHII: 10 SECRETARY OF STATE TALLAHASSEE FLORIDA
Dated	May 23, 2009 Ben Guy Signature of a member of a memb	authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00