L05000049544

(Requestor's Name)				
(Address)				
(Áddress)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: A. LUNT				
MAY 28 2008				
EXAMINER				

Office Use Only

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FILED

THE HAY 23 P 1: 48

SECRETARY OF STATE.

TALLAHASSEE, FIRME.

COVER LETTER

TO: Registration S Division of Co		•	
SUBJECT: Evergi	een Real Estate, LL	C	
		ited Liability Company)	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Starlett Kline	·	TALE SE
		(Name of Person)	THE AN 23 P
		(Firm/Company)	me T in
3200 Port Royale Dr., N.		# 704	FLORIDI FLORIDI
		(Address)	15 to
•••	Ft. Lauderdale, FL 3330		
		(City/State and Zip Code)	
For further information	concerning this matter, please of	all:	
Starlett Kline		at (954) 771-9810	
(Name	e of Person)	(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)
Regis	LING ADDRESS: tration Section on of Corporations	STREET/COURIED Registration Section Division of Corporati	

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Evergreen Real Estate, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Compar	ny were filed on May 18, 2005	and assigned
lorida document number L05000049544		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lia</u>	bility company here:	
Seminole Indian Holdings, LLC		
he new name must be distinguishable and end with the words "Lir.L.C."	nited Liability Company," the desi	
Enter new principal offices address, if applicable:		FR A T
Principal office address MUST BE A STREET ADDRESS)		SSE 23
		ing o m
		STATE LORIDA
Inter new mailing address, if applicable:		8 8
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address he	office address on our records	, enter the name of the ne
egistered agent and/or the new registered office address he		
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida	street address)
		orida
	(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 Changing Registered Agent, Signature of New Registered Agent)

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

	Name	Address	Type of Ac
			Add
			Remove
			Add Remove
			<u> </u>
<u>_</u>			Add .
		J ₀	Remove
		For a	-
<u></u>		AHAS	□ Remove
		ASSEE	, ;
		E OF S	
			Remove
		~	
			Add
			Remove
f amendi:	ng any other information, ente	er change(s) here: (Attach additional sheets, if necessary.,)
	•		
			
			
d <u>May 22</u>		2008	
d <u>May 22</u>	Starlett	2008 Chine a member or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00