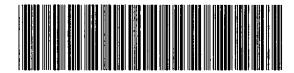
# L0500054847

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SECRETARY OF STATE
ALLAMASSEF, ELORIDA

D. BRUCE 0CT 16 2008

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Signa Properties LLC (Name of Limited Liability Company) #205000054847
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Donald Perry (Name of Person)
(Firm/Company)  7065 Horizon Circle (Address)  Windernere FL 34786 (City/State and Zip Code)
(Address)  Windernere, FL 34786  (City/State and Zip Code)
(City/state and Zip Code)
For further information concerning this matter, please call:
Barbara M Ghire at (352) 343-4190  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\bigsquare \text{\$\frac{1}{2}}\$\$\$30.00 Filing Fee & \$\bigsquare \text{\$\frac{1}{2}}\$\$\$\$\$Certificate of Status & \$\bigsquare \text{\$\frac{1}{2}}\$\$\$\$\$(additional copy is enclosed)\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)\$\$\$\$\$\$\$\$\$\$\$\$\$(additional copy is enclosed)\$
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  San Dabd Cah B (a.g.)  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsquare{\text{S}} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Letter # 808A00052933 (enclosed)

## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 7, 2008

DONALD J. PERRY 7065 HORIZON CIRCLE WINDERMERE, FL 34786

SUBJECT: SIGMA PROPERTIES LLC

Ref. Number: L05000054847

We have received your document for SIGMA PROPERTIES LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 808A00052933

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	perties LLC		
(Name of the Limited Liability Compan (A Florida Limited Lia	y <mark>as it now appears on our record</mark> ability Company)	<u>ls.</u> )	
The Articles of Organization for this Limited Liability Company we Florida document number <u>LOS00054847</u>	vere filed on	206 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ity company here:		
n/a	•	•	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designa	tion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	n/a	O8 SECH	
(Principal office address MUST BE A STREET ADDRESS)		SET OF T	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	N/a	TED  15 AM 10: 14  RY OF STATE SEE, FLORIDA	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		nter the name of the new	
Name of New Registered Agent:	NA		
New Registered Office Address:			
	(Enter Florida street address)		
	, Flori		
	(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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

<u> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Richard Brown	205 Patrice Hope S Leesberg, FL 34748	Add Remove
			Add Remove
	·		Add Remove
). If amend	ing any other information, enter ch	ange(s) here: (Attach additional sheets, if neces	esary.)
			O8 C SECRE
  	Oct 13	2008	PILED 08 OCT 15 AM 10 SECRETARY OF STA TALLAMASSEE, FLORE

Page 2 of 2

Filing Fee: \$25.00