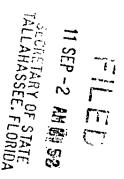
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Office Use Only



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D. BRUCE

SEP 0 6 2011

**EXAMINER** 

## **COVER LETTER**

TO;	Registration Season Division of Con				
SUBJ	LLC				
5020		· · · · · · · · · · · · · · · · · · ·	ted Liability Company		
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		Frank P. Rainer			
	•		Name of Person		•
		Quartet D	Quartet Developmemt Company, LLC		-
			Firm/Company		
411 East College Avenue				ue	
			Address		
		Tall	ahassee, Florida 323	301	75.
City/State and Z					
		raine	ersrc@embarqmail.c	om	HAR E
For fu	rther information o	concerning this matter, please c		port notification)	-2 L
	F.,,	out D. Daines	050	577 65 <b>57</b>	OF ST
		ank P. Rainer of Person	at ( <u>850</u> ) Area Code &	577-6557 & Daytime Telephone Number	
Enclos	sed is a check for t	he following amount:			
,	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is a	enclosed) Certifie	ate of Status &
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registratio Division o Clifton Bu	f Corporations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Quartet Developn	nent Company,	LLC	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears d Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on	6/16/2005	and assigned
Florida document numberL0500060078			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here	:	
	Management, LLC		
The new name must be distinguishable and end with the words "Li".L.C."	imited Liability Compar	ny," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:			Po -
(Principal office address MUST BE A STREET ADDRESS)			SE
			ASS T
			E O P
Enter new mailing address, if applicable:			THE M
(Mailing address MAY BE A POST OFFICE BOX)	<del>4</del>		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	<del></del>		Add Remove
<del></del>			D Damaya
			Add Remove
<del></del>			Add Remove
<del> </del>			Domesia
D. If amen	ding any other information, e	nter change(s) here: (Attach additional shee	ets, if necessary.)
_			11 S.C.C.
	August 23		SEP-2 M POP STANDARD SEE. FLOO
	Signature	of a prember or authorized representative of a me	24 <b>9</b>
	· · · · · · · · · · · · · · · · · · ·	Frank P. Rainer Typed or printed name of signee	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

Filing-Fee: \$25.00