#105000064693

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COVER LETTER

TO:

Registration Section Division of Corporations

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IRIECT: CELINE VILLAS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NANCY CARPENTER

Name of Person

DEE-JAY & ASSOCIATES, INC.

Firm/Company

2803 N POINCIANA BLVD

Address

KISSIMMEE, FL 34746

City/State and Zip Code

NANCY@DEEJAYTAXES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NANCY CARPENTER

_{at} 407 396-7522

Name 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)

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

13 FEB 19 PM 3: 38

ALLAHASSEE, FLORIDA

CELINE VILLAS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company we Florida document number <u>L05000064693</u>	re filed on 6/28/2005	and assigned
Florida document number		
This amendment is submitted to amend the following:	,	
A. If amending name, enter the new name of the limited liabilit	y company here:	
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
_		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
_		
B. If amending the registered agent and/or registered office	address on our records, enter the	name of the new
registered agent and/or the new registered office address here:	<u> </u>	<u> </u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	:
	ity, Florida	
	ity 2	Lip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree t	o act in this canacity. I further garee.	to comply with
the provisions of all statutes relative to the proper and complete	performance of my duties, and I am f	amiliar with and
accept the obligations of my position as registered agent as provbeing filed to merely reflect a change in the registered office add		
company has been notified in writing of this change.	a cos, I hereby corgin in that the timinet	* HAVIHIY

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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ANDREW WHITMORE	18 BROADLANDS	Add
		INGLEBY BARWICK STOCKTON ON TEE	S Remove
		ENGLAND TS17 5NE UP	<u><</u>
			Add
			Remove
			_
			Add
			Remove
			-
			_ [] Add
			Remove
			Add
			Remove
			-
			Add
			Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
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Dated	FEB 13 , 2013.
	FEB 13 2013.
	Signature of a member or authorized representative of a member
	ALAN MOORE
	Typed or printed name of signee

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Filing Fee: \$25.00