## 069287

(Req	uestor's Name)
	,
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PICK-UP	WAIT MAIL
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A. LUNT

AUG 18 2008

**EXAMINER** 

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08/18/08--01003--016 \*\*25.00

## **COVER LETTER**

SUBJECT: CCI Property Development, LLC (Name of Limited Liability Company)			
(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:			
Shawn Dankoehler (Name of Person)			
<u>CCI</u> Property Development, UC			
1700 66th Street N, Svite 310			
Sf. Perfersburg FL 3270733710 (City/State and Zip Code)			
- Lander Committee			
For further information concerning this matter, please call:			
Shawn Damkoehler at (727, 686-1598 (Area Code & Daytime Telephone Number)			
(Name of Person) , (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

CCI Property De	evelopment, CLC
(Name of the Limited Liability Company (A Florida Limited Liability	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company w Florida document number LOSDOO69387	were filed on $7 - 14 - 2005$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
The new name must be distinguishable and end with the words "Limited"L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
	2 TAS
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	SO P
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	DRII
	)A
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	(Enter Florida street address)
	, Florida
	(City) (Zip Code)
NI D. 14 J. A Al- Cir If should be Desistant Assets	

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:

MGR = Manager

MGRM = Managing Member Type of Action **Address** <u>Title</u> **Name** Packer, H. Verne □ Add Remove ☐ Add Remove \_\_\_ Add Remove ☐ Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ignature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00