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TALLAHASSEE FLORIDA

MR. HODGES

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cypress Garden Hotel, 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:

Chris Osmon  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

PO Box 2112  
(Address)

Lakeland FL 33806  
(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Osmon at (863) 581-7533  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

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☐ \$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**

Cypress Garden Hotel, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 7-26-05 and assigned document number LO5000074155

**SECOND:** This amendment is submitted to amend the following:

NAME change TO  
Lake View INN, LLC

Dated

2-22 06

STATE OF FLORIDA  
TALLAHASSEE

06 FEB 27 AM 11:18

FILED

Chris Osmon AS Mng, Member

Signature of a member or authorized representative of a member

Chris Osmon

Typed or printed name of signee

**Filing Fee: \$25.00**