

APR. 27 2012 3:23PM

JONES FOSTER JOHNSTON & STUBBS, P.A.

APR 27 2012 3:23PM

**L05000075084**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H12000116703 3)))



H120001167033ABCV

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

RECEIVED  
12 APR 27 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS, P.A.  
Account Number : 076077003231  
Phone : (561) 650-0471  
Fax Number : (561) 650-0431

**\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: bobbeson@hotmail.com

FILED  
2012 APR 27 AM 12:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
RECEIVED

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BOYNTON BEACH PROPERTY PARTNERS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

**A. LUNT**

Electronic Filing Menu

Corporate Filing Menu

Help

APR 30 2011

**EXAMINER**

APR. 27. 2012 3:36PM

JONES FOSTER 561 650 0435

NO. 2198 P. 2  
H12000116703 3

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**Boynton Beach Property Partners, 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 were filed on July 29, 2005 and assigned  
Florida document number L05000075084.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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:

Name of New Registered Agent:

Robert Beson

New Registered Office Address:

331 Regatta Drive

*Enter Florida street address*

Jupiter  
City

Florida

33477

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.

Robert J. Beson  
If Changing Registered Agent, Signature of New Registered Agent

H12000116703 3

APR. 27. 2012 3:36PM

JONES FOSTER 561 650 0435

NO. 2198 HI20003116703 3

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Robert Beson	331 Regatta Drive Jupiter, FL 33477	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jeffrey P. Sussman	331 Regatta Drive Jupiter, FL 33477	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated April 6, 2012

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Larry B. Alexander, Jr., Authorized Representative

\_\_\_\_\_  
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

2012 APR 27 AM 10:00  
RECEIVED  
TALLAHASSEE, FLORIDA

FILED

HI2000116703 3