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EXAMINER

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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: ADDISO	N RESERVE LLC		0
		ed Liability Company)	
The enclosed Articles of A	amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	TYLER A. GOLD, ESQ.		
		(Name of Person)	
	TYLER A. GOLD, P.A.		
		(Firm/Company)	
	1000 S. PINE ISLAND RD	D., #310	
		(Address)	
	PLANTATION, FL 33324		
		(City/State and Zip Code)	
For further information co	ncerning this matter, please ca	11:	
TYLER A. GOLD, ESQ.		at (954 ₎ 565-5577	
(Name of	f Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	e 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:

TO:

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

ADDISON RESERVE LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our rebility Company)	ecords.)
The Articles of Organization for this Limited Liability Company w	vere filed on 08/04/2005	and assigned
Florida document number L05000076701		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ty company here:	
The new name must be distinguishable and end with the words "Limite L.L.C."	d Liability Company," the de	signation "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		
Truning unity con harra DD II I COA CALLED DOIL		
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:		ls, <u>enter the name of the new</u>
Name of New Registered Agent:		75.00 PE:: 09
New Registered Office Address:		>
	•	a street address)
	(City)	(Zip Gode)
New Registered Agent's Signature, if changing Registered Agent:		(Zip Gode) 000000000000000000000000000000000000

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.

1 ... 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> Name <u>Address</u> Type of Action MGRM JESSE GADDIS _ Add 221 W. OAKLAND PARK BLVD. Remove FT. LAUDERDALE, FL 33311 ☐ Add Remove Add 🗂 Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Dated JANUARY 02 Signature of a member or authorized representative of a member TYLER A. GOLD, ESQ. Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00