

04/07/2010 13:40

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GARTNER BROCK & SIMON

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Division of Corporations

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Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : GARTNER BROCK & SIMON
Account Number : I19990000204
Phone : (904)399-0870
Fax Number : (904)399-1113

L. SELLERS
APR - 8 2010
EXAMINER

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SKYLINE HOTEL INVESTORS, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
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10 APR - 7 AM 10: 06
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SKYLINE HOTEL INVESTORS, 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 September 1, 2005 and assigned Florida document number L05000086852

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: 751 Oak Street Suite 503 Jacksonville, Florida 32204

Enter new mailing address, if applicable: 751 Oak Street Suite 503 Jacksonville, Florida 32204

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: New Registered Office Address: 751 Oak Street, Suite 503 Jacksonville, Florida 32204

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 Changing Registered Agent, Signature of New Registered Agent

FILED APR 7 AM 10:06 SECRETARY OF STATE ALABAMA, FLORIDA

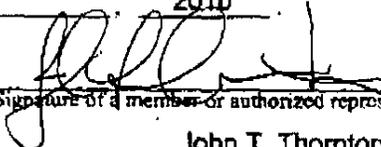
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Skyline Realty Services, Inc	751 Oak Street Suite 600 Jacksonville, Florida 32204	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Thornton & Associates, LLC	751 Oak Street Suite 503 Jacksonville, Florida 32204	<input checked="" 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
			<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 1 2010


 Signature of a member or authorized representative of a member
 John T. Thornton
 Typed or printed name of signee