

Florida Department of State
Division of Corporations
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To:

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

L. SELLERS

From:

Account Name : RMC PROPERTY GROUP
Account Number : I20040000170
Phone : (813) 960-8154
Fax Number : (813) 963-2596

JUN 18 2008

EXAMINER

RECEIVED

08 JUN 17 PM 12:17

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TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

ULMERTON POINTE OUTPARCELS, L.L.C.

Certificate of Status	0
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Page Count	5
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June 16, 2008

FLORIDA DEPARTMENT OF STATE

Division of Corporations

ULMERTON POINTE OUTPARCELS, L.L.C.
1733 WEST FLETCHER AVENUE
TAMPA, FL 33612US

SUBJECT: ULMERTON POINTE OUTPARCELS, L.L.C.
REF: L05000092115

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Leslie Sellers
Regulatory Specialist II

FAX Aud. #: H08000151466
Letter Number: 908A00036650

P.O BOX 6327 - Tallahassee, Florida 32314

Received Time Jun.17. 7:39AM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ulmerton Pointe Outparcels, L.L.C.
(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:

Peter S. Rosen

(Name of Person)

(Firm/Company)

416 North Adams Street

(Address)

Tallahassee, Florida 32301

(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Dendler

(Name of Person)

at (813) 960-8154

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
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(additional copy is enclosed)

☐ \$60.00 Filing Fee,
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(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

Ulmerton Pointe Outparcels, L.L.C.

(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 09/19/2005 and assigned
Florida document number L05000092115.

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."

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: Peter S. Rosen
New Registered Office Address: 416 North Adams Street
(Enter Florida street address)
Tallahassee, Florida 32301
(City) (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.

(If Changing Registered Agent, Signature of New Registered Agent)

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	Mitchell F. Rice	1733 West Fletcher Avenue Tampa, Florida 33612	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Steven M. Leoni	416 North Adams Street Tallahassee, Florida 32301	<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 May June 13, 2008

 Signature of a member or authorized representative of a member
 Gregory W. Dworzanowski
 Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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